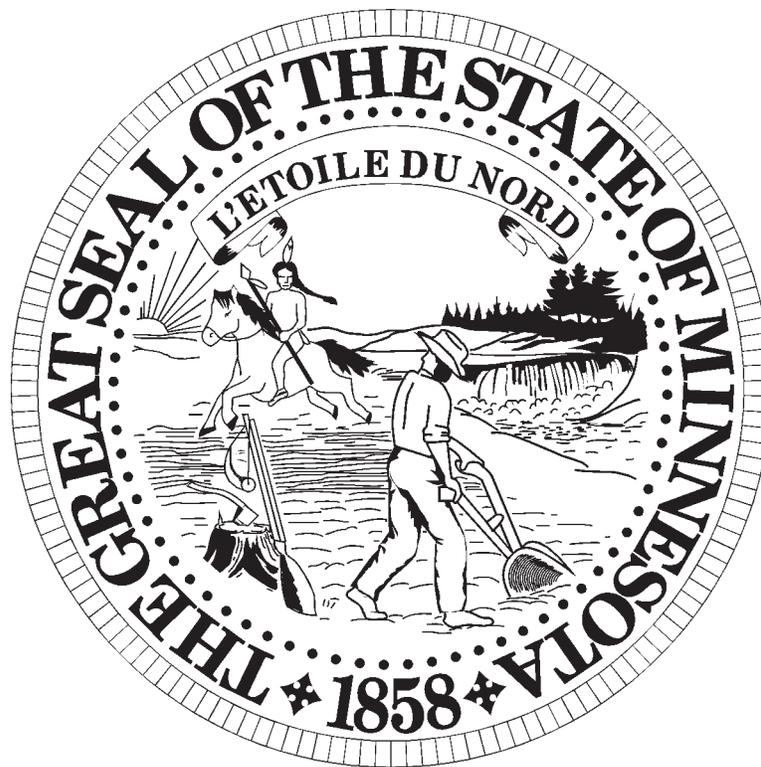


State of Minnesota

# State Register



**Rules and Official Notices Edition**

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# State Register

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The *State Register* is the official publication of the State of Minnesota, published weekly to fulfill the legislative mandate set forth in *Minnesota Statutes* § 14.46. The *State Register* contains:

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<b>Minnesota Rules: Amendments &amp; Additions</b>		
Monday 27 December 2004, Volume 29, #1-26.....	720	
<b>Proposed Rules</b>		
<b>Behavioral Health and Therapy Board</b>		
Proposed Permanent Rules Relating to Supervised Field Experience and Professional Practice.....	723	
Proposed Permanent Rules Relating to Continuing Education.....	726	
Proposed Permanent Rules Relating to License Renewals and Termination of License.....	730	
Proposed Permanent Rules Relating to Conduct.....	734	
<b>Health Department</b>		
Division of Infectious Disease Epidemiology, Prevention and Control: Proposed Permanent Rules Relating to Communicable Disease Reporting.....	746	
<b>Adopted Rules</b>		
<b>Architecture, Engineering, Land Surveying, Landscape Architecture, Geoscience, and Interior Design Board</b>		
Adopted Permanent Rules Relating to Landscape Architects.....	754	
<b>Health Department</b>		
Adopted Permanent Rules Relating to Radiation Safety.....	755	
<b>Labor and Industry Department</b>		
Adopted Exempt Permanent Rules Relating to Occupational Safety and Health; Adoption of Federal Standards by Reference.....	762	
<b>Revenue Notices</b>		
<b>Revenue Department</b>		
Revenue Notice #04-10: Sales and Use Tax – Exemption for Fund-Raising Events – Lawful Gambling Activities.....	763	
<b>Official Notices</b>		
<b>Agriculture Department</b>		
Agricultural Chemical Response Compensation Board (ACRRA Board): Notice of Meeting Schedule.....	763	
Notice of Rescheduled ACRRA Board Meeting.....	764	
Notice of February 3rd ACRRA Board Retreat.....	764	
<b>Environmental Assistance Office</b>		
Local Government Assistance Unit: REQUEST FOR COMMENTS on Planned Amendments to the Rules Governing the Development, Adoption and Implementation of Solid Waste Management Plans in Greater Minnesota.....	764	
<b>Health Department</b>		
Division of Environmental Health: REQUEST FOR COMMENTS on Possible Amendment of Rules Governing Health Risk Limits for Groundwater.....	765	
<b>Labor and Industry Department</b>		
Labor Standards Unit: Notice of Prevailing Wage Determinations for Commercial Projects in each of 87 counties statewide.....	766	
<b>Metropolitan Airports Commission</b>		
Notice of Adoption of Ordinance No. 101.....	766	
<b>Metropolitan Council</b>		
Public Hearing on Water Resources Management Policy Plan Update.....	767	
<b>Pollution Control Agency</b>		
Public Notice of Rescission of State Manufacturing General Air Emission Permit.....	768	
<b>State Rehabilitation Council</b>		
Meeting Dates 2005.....	768	
<b>State Grants &amp; Loans</b>		
<b>Human Services Department</b>		
Health Care Purchasing and Delivery Systems Division: Notice of Request for Proposals from Managed Care Organizations (MCOs) for the Expansion of Minnesota Disability Health Options.....	769	
Request for Proposals for Projects of Regional Significance under the Children and Community Services Act.....	770	
<b>State Contracts</b>		
<b>Corrections Department</b>		
Notice of Request for Proposals (RFP) for Juvenile Female State Commit Residential Program.....	771	
<b>Health Department</b>		
Notice of Availability of Contract for Hospital HVAC for the Minnesota Bioterrorism Hospital Preparedness Program (BHPP).....	771	
<b>Transportation Department</b>		
Engineering Services Division: Potential Availability of Contracting Opportunities for a Variety of Highway Related Technical Activities (the “Consultant Pre-qualification Program”).....	772	
Engineering Services Division: Professional/Technical Contract Opportunities.....	772	
<b>Non-State Contracts &amp; Grants</b>		
<b>Minnesota State Court, 4<sup>th</sup> Judicial District (Hennepin County)</b>		
Request for Proposal for a Digital Audio Recording System.....	773	
<b>University of Minnesota</b>		
Bid Information Service (BIS) Available for All Potential Vendors.....	773	
Commodity, Service and Construction Contracts information is available from the Materials Management Helpline (651) 296-2600, or Web site: <a href="http://www.mmd.admin.state.mn.us">www.mmd.admin.state.mn.us</a> Information or subscriptions to the <i>State Register</i> is available through Minnesota’s Bookstore (651) 297-3000, or (800) 657-3757, Web site: <a href="http://www.minnesotasbookstore.com">www.minnesotasbookstore.com</a>		

# Minnesota Rules: Amendments and Additions

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The *State Register* is the official source, and only complete listing, for all state agency rulemaking in its various stages. State agencies are required to publish notice of their rulemaking action in the *State Register*. Published every Monday, the *State Register* makes it easy to follow and participate in the important rulemaking process. Approximately 80 state agencies have the authority to issue rules. Each agency is assigned specific **Minnesota Rule** chapter numbers. Every odd-numbered year the **Minnesota Rules** are published. The current 1999 set is a 13-volume bound collection of all adopted rules in effect at the time. Supplements are published to update this set of rules. Generally speaking, proposed and adopted exempt rules do not appear in this set because of their short-term nature, but are published in the *State Register*.

An agency must first solicit **Comments on Planned Rules** or **Comments on Planned Rule Amendments** from the public on the subject matter of a possible rulemaking proposal under active consideration within the agency (*Minnesota Statutes* §§ 14.101). It does this by publishing a notice in the *State Register* at least 60 days before publication of a notice to adopt or a notice of hearing, or within 60 days of the effective date of any new statutory grant of required rulemaking.

When rules are first drafted, state agencies publish them as **Proposed Rules**, along with a notice of hearing, or a notice of intent to adopt rules without a hearing in the case of noncontroversial rules. This notice asks for comment on the rules as proposed. Proposed emergency rules and withdrawn proposed rules are also published in the *State Register*. After proposed rules have gone through the comment period, and have been rewritten into their final form, they again appear in the *State Register* as **Adopted Rules**. These final adopted rules are not printed in their entirety in the *State Register*, only the changes made since their publication as Proposed Rules. To see the full rule, as adopted and in effect, a person simply needs two issues of the *State Register*, the issue the rule appeared in as proposed, and later as adopted. For a more detailed description of the rulemaking process, see the most current edition of the *Minnesota Guidebook to State Agency Services*.

The *State Register* features partial and cumulative listings of rules in this section on the following schedule: issues #1-13 inclusive; issues #14-25 inclusive; issue #26 cumulative for issues #1-26; issues #27-38 inclusive; issue #39, cumulative for issues #1-39; issues #40-51 inclusive; and issues #1-52 (or 53 in some years), cumulative for issues #1-52 (or 53). An annual subject matter index for rules was separately printed usually in August, but starting with Volume 19 now appears in the final issue of each volume. For copies or subscriptions to the *State Register*, contact Minnesota's Bookstore, 117 University Avenue, St. Paul, MN 55155 (612) 297-3000, or toll-free 1-800-657-3757.

## Volume 29, Issues #1-26

### Administration Department

1346.0050; .0060; .0101; .0102; .0103; .0104; .0105; .0106; .0107; .0108; .0108; .0109; .0110; .0201; .0202; .0301; .0306; .0309; .0401; .0403; .0404; .0505; .0506; .0507; .0508; .0603; .0604; .0703; .0709; .0801; .0803; .0901; .1001; .1003; .1004; .1006; .1007; .1011; .1204; .1500; .1601; .1602; .1603; .1604; .1605; .1606; .5050; .5201; .5202; .5301; .5303; .5304; .5306; .5402; .5403; .5404; .5406; .5407; .5408; .5409; .5410; .5501; .5503; .5504; .5602; .5620; .5629; .5630; .5700; .5801; .5802; .5803; .5804; .5805; .5806; .5807; .5900 (adopted)..... 299

1346.0108; .0203; .0204; .0302; .0304; .0405; .0406; .0407; .0408; .0409; .0410; .0411; .0414; .0418; .0421; .0424; .0504; .0602; .0605; .0606; .0607; .0608; .0707; .0710; .0807; .0808; .0809; .0913; .1002; .1005; .1104; .1107; .1207; .1503; .1505; .1520; .1521; .1906; .2002; .2003; .2101; .2102; .2104; .2106; .2107; .2108; .2109; .2110; .2111; .2113; .2114; .2115; .2120; .2122; .2123; .2124; .2125; .2126; .2127; .2133; .2201; .2202; .2205; .2206; .2211; .2212; .2213; .2215; .2216; .2220; .2226; .2500; .2600 (repealed)..... 299

### Administrative Hearings Office

1415.0100; .0300; .0500; .0600; .0700; .0800; .1000; .1100; .1250; .3200; .3300; .3500; .3700; .3800; .3900; .4000; .4100 (proposed)..... 560

1415.0200; .0300 s.3, 4, 7, 10, 11, 14, 17; .0400; .0800 s.3; .0900; .1000 s.3; .1200; .1300; .1400; .1500; .1600; .1700; .1800; .1900; .2000; .2100; .2200; .2300; .2400; .2500; .2600; .2700; .2800; .2900; .3000; .3100; .3200 s.4, 5, 6; .3400; .3500 s.2, 3; .3600; 5220.2605; .2610; .2620; .2640; .2655; .2690; .2920 s.1, 2, 3, 4, 5, 7, 8 (proposed repealer)..... 560

1420.0100; .0200; .0300; .1300; .1800; .1850; .1900; .2050; .2150; .2200; .2250; .2350; .2400; .2500; .2600; .2605; .2700; .2800; .2900; .3150; .3700; .3800 (proposed)..... 549

### Agriculture Department

1500.1201; 1505.2100; 1510.0370; 0371; 0372; 0400; 0401; .0402; .0408; 1930; .1943; .1947; .2070; .2130; .2180; .2190; .2200; .2220; .2230; .2500; .2510; .2520; .2530; .2540; .2550; .2560; .2570; .2580; .2590; .2595; 1515.3000; .3100; .3200; .3400; .3500; .3600; .3800; 1552.0050; 1556.0110; .0120; .0132; .0134; .0145; .0160; 1570.0700; .0800 (proposed)..... 239

1505.0060; .0360; .0370; 1510.0890; .0900; .0910; .0920; .0930; .0940; .0950; .0960; .0970; .0980; .0990; .1000; .1010; .1020; .1030; .1040; .1050; .1060; .1070; .1080; .1090; .1935; .1940; .1950; .2000; .2010; .2020; .2030; .2040; .2050; .2060; .2080; .2090; .2100; .2110; .2120; .2140; .2150; .2160; .2210; 1515.0100; .0200; .0300; .0400; .0500; .0600; .0700; .0800; .0900; .1000; .1100; .1200; .1300; .1400; .1500; .1600; .1700; .1800; .1900; .2000; .2100; .2200; .2500; .2550; .2600; .2700; .2800; .2900; .3100 s.6; .3900; 1552.0030 s.4; 1556.0140 (proposed repealer)..... 239

1500.1201; 1505.2100; 1510.0370; 0371; 0372; 0400; 0401; .0402; .0408; 1930; .1943; .1947; .2070; .2130; .2180; .2190; .2200; .2220; .2230; .2500; .2510; .2520; .2530; .2540; .2550; .2560; .2570; .2580; .2590; .2595; 1515.3000; .3100; .3200; .3400; .3500; .3600; .3800; 1552.0050; 1556.0110; .0120; .0132; .0134; .0145; .0160; 1570.0700; .0800 (adopted)..... 655

1505.0060; .0360; .0370; 1510.0890; .0900; .0910; .0920; .0930; .0940; .0950; .0960; .0970; .0980; .0990; .1000; .1010; .1020; .1030; .1040; .1050; .1060; .1070; .1080; .1090; .1935; .1940; .1950; .2000; .2010; .2020; .2030; .2040; .2050; .2060; .2080; .2090; .2100; .2110; .2120; .2140; .2150; .2160; .2210; 1515.0100; .0200; .0300; .0400; .0500; .0600; .0700; .0800; .0900; .1000; .1100; .1200; .1300; .1400; .1500; .1600; .1700; .1800; .1900; .2000; .2100; .2200; .2500; .2550; .2600; .2700; .2800; .2900; .3100 s.6; .3900; 1552.0030 s.4; 1556.0140 (repealed)..... 655

# Minnesota Rules: Amendments and Additions

## Animal Health Board

1710.1300; .1310; .1350; .1360; .1410; .1420; .1440; .1500 (proposed).....	71
1710.1300; .1310; .1350; .1360; .1410; .1420; .1440; .1500 (adopted).....	475

## Architecture, Engineering, Land Surveying, Landscape Architecture, Geoscience, and Interior Design Board

1800.0200; .0400; .0500; .0600; .0800; .0900; .1500; .1700 (proposed).....	149
1800.0200; .0400; .0500; .0600; .0800; .0900; .1500; .1700 (adopted).....	754
1800.1600 (proposed repealer).....	149
1800.1600 (repealed).....	754

## Behavioral Health and Therapy Board

2150.0050; .0060; .0070; .0080; .0090; .0100; .0110; .0120; .0130; .0140; .0150; .0160 (proposed).....	730
2150.2500; .2510; .2520; .2530; .2540; .2550; .2560; .2570; .2580; .2590; .2600; .2650; .2660 (proposed).....	726
2150.5000; .5010 (proposed).....	723
2150.7500; .7505; .7510; .7515; .7520; .7525; .7530; .7535; .7540; .7545; .7550; .7555; .7560; .7565; .7570; .7575; .7580; .7585; .7590; .7595; .7600; .7605; .7610 (proposed).....	734

## Dentistry Board

3100.0100; .1700; .1750; .1850; .2000; .3600; .5100; .5200; .5300; .5400; .6300 (proposed).....	306
3100.0100 s. 20; .2000 s. 8, 8a; .4100; .4200; .4300; .4400; .4500; .4600 (repealed).....	306

## Environmental Quality Board

4410.4300; .4600 (proposed).....	571
----------------------------------	-----

## Health Department

<i>Minnesota Statutes</i> 62J (propopsed exempt).....	217
4605.7000; .7020; .7030; .7040; .7042; .7044; .7046; .7050; .7060; .7070; .7075; .7080; .7090; .7100; .7500; .7700; .7800 (proposed).....	746
4617.0002; .0005; .0010; .0015; .0020; .0025; .0030; .0065; .0066; .0067; .0068; .0070; .0075; .0080; .0084; .0088; .0090; .0100; .0121; .0171; .0176 (proposed).....	574
4617.0002 s.2c, 3, 4, 5, 7, 12, 14, 16, 18, 19, 22, 24, 25, 26, 27, 28, 28b, 29, 32, 34, 35, 36, 37c, 37d, 38, 41; 0020 s.4, 5, 6, 7, 8, 9, 11; .0030 s.2, 3; 0037; 0040; .0042; .0043; .0065 s.4; .0084 s.14, 0088 s.3; 0121 s.1 (proposed repealer).....	574
4731.0100; .0200; .0210; .0230; .0240; .0250; .0260; .0270; .0280; .0290; .0300; .0315; .0355; .0400; .0401; .0402; .0403; .0405; .0406; .0407; .0408; .0409; .0410; .0411; .0412; .0413; .0414; .0415; .0416; .0417; .0418; .0419; .0420; .0421; .0422; .0423; .0525; .0530; .0535; .0540; .0550; .0555; .0560; .0565; .0570; .0575; .0580; .0585; .0590; .0595; .0597; .0600; .0605; .0610; .0615; .0620; .0625; .0630; .0700; .0705; .0710; .0715; .0720; .0725; .0730; .0735; .0740; .0745; .0750; .0760; .0765; .0770; .0780; .0790; .0795; .0815; .0820; .0825; .0830; .0840; .1000; .1010; .1020; .1030; .1040; .1050; .1060; .1070; .1080; .1090; .2000; .2010; .2020; .2030; .2040; .2050; .2060; .2070; .2080; .2090; .2095; .2100; .2150; .2200; .2210; .2220; .2230; .2240; .2270; .2280; .2290; .2300; .2310; .2320; .2330; .2340; .2350; .2400; .2410; .2420; .2430; .2440; .2450; .2500; .2510; .2520; .2530; .2540; .2550; .2560; .2600; .2610; .2620; .2630; .2640; .2650; .2700; .2750; .2800; .2950; .3000; .3005; .3010; .3015; .3020; .3025; .3030; .3035; .3040; .3045; .3050; .3055; .3060; .3065; .3070; .3075; .3080; .3090; .3105; .3110; .3115;	

.3120; .3130; .3135; .3140; .3145; .3150; .3155; .3160; .3165; .3170; .3175; .3200; .3210; .3215; .3220; .3225; .3230; .3235; .3240; .3245; .3300; .3305; .3315; .3320; .3325; .3330; .3345; .3365; .3380; .3390; .3395; .3400; .3405; .3410; .3415; .3420; .3500; .3520; .3530; .3540; .3550; .3560; .3570; .3580; .4000; .4010; .4020; .4030; .4040; .4050; .4060; .4070; .4080; .4090; .4100; .4110; .4120; .4130; .4140; .4150; .4160; .4170; .4180; .4190; .4200; .4210; .4220; .4240; .4250; .4260; .4270; .4290; .4310; .4330; .4350; .4360; .4400; .4401; .4402; .4403; .4404; .4405; .4407; .4408; .4409; .4410; .4411; .4412; .4413; .4414; .4415; .4420; .4421; .4422; .4423; .4424; .4425; .4426; .4427; .4428; .4429; .4432; .4433; .4434; .4435; .4436; .4440; .4441; .4442; .4443; .4444; .4445; .4450; .4451; .4452; .4453; .4454; .4455; .4456; .4457; .4458; .4459; .4460; .4461; .4463; .4464; .4465; .4466; .4467; .4468; .4469; .4470; .4471; .4472; .4473; .4474; .4475; .4476; .4477; .4478; .4479; .4500; .4501; .4502; .4503; .4504; .4505; .4506; .4507; .4508; .4509; .4510; .4511; .4512; .4513; .4514; .4515; .4516; .4517; .4518; .4519; .4520; .4521; .4522; .4523; .4524; .4525; .4526; .4527; .6000; .6010; .6020; .6030; .6040; .6050; .6060; .6070; .6080; .6090; .6100; .6110; .6120; .6130; .6140; .6150; .6160; .6170; .6180; .6190; .6200; .6210; .6220; .6230; .6240; .6250; .6260; .6270; .7000; .7010; .7020; .7030; .7040; .7050; .7060; .7070; .7080; .7090; .7100; .7110; .7120; .7130; .7140; .7150; .7160; .7170; .7200; .7210; .7220; .7230; .7240; .7250; .7260; .7270; .7280 (adopted).....	755
4730.0100 s. 5a, 7b, 22, 22a, 24, 50, 52a, 58, 63, 73a, 106b, 106c, 115, 116, 119a, 121a, 129, 151, 152, 155, 169a, 181a, 187a, 188, 201a, 206, 213a; .1000; .2580; .2600; .2710; .2750; .2800; .3400; .3500; .3610 (repealed).....	755
4761.2220; .2240; .2260; .2280; .2300; .2320; .2340; .2360; .2420; .2440; .2570; .2645; .2660 (adopted).....	531

## Labor and Industry Department

5205.0010 (proposed exempt).....	426
5205.0010 (adopted exempt).....	762
5208.1500 (proposed exempt).....	99
5208.1500 (proposed exempt).....	381
5219.0500; 5221.4020 (adopted exempt).....	358
5220.0107; .0110; .0120; .0130; .0410; .0450; .0510; .0710; .0950; .1400; .1500; .1600; .1700; .1801; .1802; .1900 (proposed).....	685
5220.0120 s. 4 (proposed repealer).....	685
5220.2605; .2610; .2620; .2640; .2655; .2690; .2920 s.1, 2, 3, 4, 5, 7, 8 (proposed repealer).....	560

## Natural Resources Department

6216.0250; .0350 (adopted emergency).....	135
6230.0400; 6234.0400; .1700; .2000; 6240.0610; .1000; .1200; .1500; .1600; .1700; .1750; .1800; .1850; .2100 (adopted expedited emergency).....	218
6230.0400 s.29; 6234.1800; 6240.1000 s.2; .1800 s. 2,3 (repealed expedited emergency).....	218
6230.0400; .0800; 6240.0650; .0950; .1000; .1100; .1150; .1900 (adopted expedited emergency).....	332
6232.0900; 1000; .2550; .2560 (adopted expedited emergency).....	77
6232.1100, s. 5 (repealed expedited emergency).....	77
6232.1600; .1800 (adopted expedited emergency).....	475
6232.3056 (adopted expedited emergency).....	109
6234.0300; 6236.0700; 6237.0100; .0200; .0300; .0400; .0500; .0600; .0700 (adopted expedited emergency).....	5
6236.0300; .0600; .0810; .1060; 6240.1100 (adopted expedited emergency).....	597
6236.0810; .1060 (repealed expedited emergency).....	597
6240.0250 (adopted expedited emergency).....	170

# Minnesota Rules: Amendments and Additions

**6240.1000 s.2; 6230.0400 s.5, 21 (repealed expedited emergency, as published in the State Register, Vol. 29, page 218, Aug 23, 2004)**..... 332  
**6264.0400; 6266.0700 (adopted exempt)**..... 596

## Pollution Control Agency

**Pollution Control Agency**  
**7001.0010; .0140; .3050; .3075; .3400; .3410; .3500; 7011.1245; 7035.0300; .0800; .2525; .2535; .2545; .2565; .2585; .2625; .2635; .2645; .2655; .2870 (proposed)**..... 189  
**7001.0040; .1040; 7002.0220; .0250; 7090.0010; .0020; .0030; .0040; .0060; .0080; .1000; .1010; .1040; .2000; .2010; .2020; .2030; .2040; 2060; .3000; .3010; .3040; .3060; .3080 (proposed)**..... 415  
**7001.0520; 7045.0020; .0120; .0206; .0208; .0214; .0450; .0552; .0685; .1400 (proposed)**.....623 and 651  
**7001.1020 s. 16a, 16b, 16c, 16d, 17a, 28a; .1035 (proposed repealer)**..... 415  
**7007.0100; .0150; .0200; .0250; .1050; .1100; .1102; .1105; .1107; .1110; .1140; .1141; .1142; .1143; .1144; .1145; .1146; .1147; .1148; 7011.0065; .0070; .0075; .0917; 7019.3020; .3030 (proposed)**..... 35  
**7007.1144; .1148 (adopted)**..... 626  
**7035.2865 (proposed repealer)**..... 189  
**7045.0020; .0090; .0450; .0478; .0485; .0545; .0546; .0547 (proposed)**..... 330  
**7045.0020 s. 13a; .0545 s. 1, 2, 3, 4, 5, 6, 7, 8; .0546 s. 1 (proposed repealer)**..... 330

## Public Safety Department

**7406.0100; .0300; .0310; .0330; .0350; .0355; .0360; .0370; .0380; .0450; .0475; .0500; .0700; .0900; .1000; .2700 (adopted)**..... 97  
**7406.0100 s. 20; .0350 s. 5; .0500 s. 3 (repealed)**..... 97  
**7560.0100; .0150; .0225; .0250; .0325; .0350; .0375 (proposed)**..... 697  
**7560.0100 s.5 becomes s. 8; s. 5a becomes s. 9; s. 6 becomes s.11 (proposed renumbering)**..... 697

## Public Utilities Commission

**7829.2550 (proposed)**..... 5

## Gambling Control Board

**7861.0010; .0020; .0030; .0040; .0050; .0060; .0070; .0080; .0090; .0100; .0110; .0120; .0130; .0140; .0150; 7862.0010; 7863.0010; .0020; .0050; .0060; 7864.0010; .0030; 7865.0010; .0020; .0025; .0030; .0040; .0050 (adopted)**..... 443  
**7861.0010, s. 2, 19, 29, 37, 40, 41, 42, 45, 46, 47; .0020, s 6; .0030, s. 3, 8; .0040, s. 7; .0100, s. 3, 6, 10; .0140, s. 2, 3; .0150; 7862.0010, s. 1, 3, 9, 10, 11a; 7863.0010, s. 1, 3, 8, 10, 13; 7864.0010, s. 1, 3, 9, 12; 7864.0030, s. 4; 7865.0020, s. 1a, 3, (repealed)**..... 443

## Revenue Department

**8092.0400; .0500; .0700; .1100; .2000 (adopted exempt)**... 276  
**8092.0200; .0300; .1300 (repealed exempt)**..... 276  
**8130.4700 (proposed)**..... 700  
**8130.0800; .4700 s. 1, 3, 4 (proposed repealer)**..... 700  
**8130.8700 (adopted)**..... 217

## Secretary of State

**8200.0300; .1100; .1200; .1700; .2100; .2200; .2500; .2600; .2900; .2950; .3000; .3100; .3110; .3200; .3350; .3600; .3700; .3900; .5300; .5400; .5500; .6200; .6400; .9115; .9300; .9305; .9310; .9315; 8210.0050; .0100; .0225; .0500; .3000 (adopted exempt)**..... 155  
**8200.2800; .5700; 8210.0200 s.1b (repealed exempt)**..... 155

## Teaching Board

**8710.7200 (proposed)**..... 355

## Transportation Department

**8820.0100; .0600; .0800; .1200; .1400; .1500; .1600; .2700; .2800; .3100; .9920; .9922; .9926; .9936; .9946; .9956; .9981; .9986; .9995 (adopted)**..... 450

## Human Services Department

**9530.6405; .6410; .6415; .6417; .6420; .6422; .6425; .6430; .6435; .6440; .6445; .6450; .6455; .6460; .6465; .6470; .6475; .6480; .6485; .6490; .6495; .6500; .6505; .6510; .6515; .6520; .6525; .6530; .6535; .6540; .6545; .6550; .6555; .6560; .6565; .6570; .6575; .6580; .6585; .6590; .6605 (adopted)**..... 129  
**9530.43100; .4110; .4120 s. 1, 3, 5, 6; .4200; .4210; .4230; .4250; .4260; .4270; .4280; .4300; .4310; .4320; .4330; .4340; .4350; .4370; .4380; .4390; .4400; .4410; .4450; .5000; .5100; .5200; .5300 s. 1, 10; .5500; .5700; .5800; .6000; .6100; .6200; .6300; .6400 (repealed)**..... 129

# Proposed Rules

**Comments on Planned Rules or Rule Amendments.** An agency must first solicit Comments on Planned Rules or Comments on Planned Rule Amendments from the public on the subject matter of a possible rulemaking proposal under active consideration within the agency (*Minnesota Statutes* §§ 14.101). It does this by publishing a notice in the *State Register* at least 60 days before publication of a notice to adopt or a notice of hearing, and within 60 days of the effective date of any new statutory grant of required rulemaking.

**Rules to be Adopted After a Hearing.** After receiving comments and deciding to hold a public hearing on the rule, an agency drafts its rule. It then publishes its rules with a notice of hearing. All persons wishing to make a statement must register at the hearing. Anyone who wishes to submit written comments may do so at the hearing, or within five working days of the close of the hearing. Administrative law judges may, during the hearing, extend the period for receiving comments up to 20 calendar days. For five business days after the submission period the agency and interested persons may respond to any new information submitted during the written submission period and the record then is closed. The administrative law judge prepares a report within 30 days, stating findings of fact, conclusions and recommendations. After receiving the report, the agency decides whether to adopt, withdraw or modify the proposed rule based on consideration of the comments made during the rule hearing procedure and the report of the administrative law judge. The agency must wait five days after receiving the report before taking any action.

**Rules to be Adopted Without a Hearing.** Pursuant to *Minnesota Statutes* § 14.22, an agency may propose to adopt, amend, suspend or repeal rules without first holding a public hearing. An agency must first solicit **Comments on Planned Rules** or **Comments on Planned Rule Amendments** from the public. The agency then publishes a notice of intent to adopt rules without a public hearing, together with the proposed rules, in the *State Register*. If, during the 30-day comment period, 25 or more persons submit to the agency a written request for a hearing of the proposed rules, the agency must proceed under the provisions of §§ 14.14-14.20, which state that if an agency decides to hold a public hearing, it must publish a notice of intent in the *State Register*.

**KEY: Proposed Rules** - Underlining indicates additions to existing rule language. ~~Strikeouts~~ indicate deletions from existing rule language. If a proposed rule is totally new, it is designated "all new material." **Adopted Rules** - Underlining indicates additions to proposed rule language. ~~Strikeout~~ indicates deletions from proposed rule language.

## Board of Behavioral Health and Therapy Proposed Permanent Rules Relating to Supervised Field Experience and Professional Practice

### DUAL NOTICE: Notice of Intent to Adopt Rules Without a Public Hearing Unless 25 or More Persons Request a Hearing, and Notice of Hearing If 25 or More Requests for Hearing Are Received Proposed Rules Governing Supervised Field Experience and Professional Practice, *Minnesota Rules*, parts 2150.5000 to 2150.5010

**Introduction.** The Board of Behavioral Health and Therapy intends to adopt rules without a public hearing following the procedures set forth in the rules of the Office of Administrative Hearings, *Minnesota Rules*, parts 1400.2300 to 1400.2310, and the Administrative Procedure Act, *Minnesota Statutes*, sections 14.22 to 14.28. If, however, 25 or more persons submit a written request for a hearing on the rules by 4:30 p.m. on January 31, 2005, a public hearing will be held in the Mississippi Room, Minnesota Department of Health Building, Snelling Office Park, 1645 Energy Park Drive, St. Paul, Minnesota 55101, starting at 9:00 a.m. on Tuesday, March 22, 2005. To find out whether the rules will be adopted without a hearing or if the hearing will be held, you should contact the agency contact person after January 31, 2005 and before the date of hearing.

**Agency Contact Person.** Comments or questions on the rules and written requests for a public hearing on the rules must be submitted to the agency contact person. The agency contact person is: Kari Rechtzigel at Board of Behavioral Health and Therapy, 2829 University Avenue SE, Suite 210, Minneapolis, MN 55414, (612) 617-2178, FAX: 612-617.2187, and *email*: [kari.rechtzigel@state.mn.us](mailto:kari.rechtzigel@state.mn.us). TTY users may call the Board of Behavioral Health and Therapy at 1-800-627-3529.

**Subject of Rules and Statutory Authority.** The proposed rules relate to the pre-degree supervised field experience and the post-degree supervised professional practice requirements for Licensed Professional Counselors in Minnesota. The statutory authority to adopt the rules is *Minnesota Statutes*, section 148B.52(a)(2) (2004). A copy of the proposed rules is published in the *State Register* and attached to this notice as mailed.

**Comments.** You have until 4:30 p.m. on Monday, January 31, 2005, to submit written comment in support of or in opposition to the proposed rules or any part or subpart of the rules. Your comment must be in writing and received by the agency contact person by the due date. Comment is encouraged. Your comments should identify the portion of the proposed rules addressed, the reason for the comment, and any change proposed. You are encouraged to propose any change desired. Any comments that you would like to make on the legality of the proposed rules must also be made during this comment period.

**Request for a Hearing.** In addition to submitting comments, you may also request that a hearing be held on the rules. Your request for a public hearing must be in writing and must be received by the agency contact person by 4:30 p.m. on Monday, January 31, 2005. Your written request for a public hearing must include your name and address. You must identify the portion of the proposed rules to which you object or state that you oppose the entire set of rules. Any request that does not comply with these requirements is not valid and cannot be counted by the agency when determining whether a public hearing must be held. You are also encouraged to state the reason for the request and any changes you want made to the proposed rules.

# Proposed Rules

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**Withdrawal of Requests.** If 25 or more persons submit a valid written request for a hearing, a public hearing will be held unless a sufficient number withdraw their requests in writing. If enough requests for hearing are withdrawn to reduce the number below 25, the agency must give written notice of this to all persons who requested a hearing, explain the actions the agency took to effect the withdrawal, and ask for written comments on this action. If a public hearing is required, the agency will follow the procedures in *Minnesota Statutes*, sections 14.131 to 14.20.

**Alternative Format/Accommodation.** Upon request, this Notice can be made available in an alternative format, such as large print, Braille, or cassette tape. To make such a request or if you need an accommodation to make this hearing accessible, please contact the agency contact person at the address or telephone number listed above.

**Modifications.** The proposed rules may be modified, either as a result of public comment or as a result of the rule hearing process. Modifications must be supported by data and views submitted to the agency or presented at the hearing and the adopted rules may not be substantially different than these proposed rules, unless the procedure under *Minnesota Rules*, part 1400.2110, has been followed. If the proposed rules affect you in any way, you are encouraged to participate in the rulemaking process.

**Cancellation of Hearing.** The hearing scheduled for March 22, 2005, will be canceled if the agency does not receive requests from 25 or more persons that a hearing be held on the rules. If you requested a public hearing, the agency will notify you before the scheduled hearing whether or not the hearing will be held. You may also call the agency contact person at (612) 617-2178 after January 31, 2005, to find out whether the hearing will be held.

**Notice of Hearing.** If 25 or more persons submit valid written requests for a public hearing on the rules, a hearing will be held following the procedures in *Minnesota Statutes*, sections 14.131 to 14.20. The hearing will be held on the date and at the time and place listed above. The hearing will continue until all interested persons have been heard. Administrative Law Judge Steve M. Mihalchick is assigned to conduct the hearing. Judge Mihalchick can be reached at the Office of Administrative Hearings, 100 Washington Square, Suite 1700, Minneapolis, Minnesota 55401-2138, **telephone** (612) 349-2544, and **FAX** (612) 349-2665.

**Hearing Procedure.** If a hearing is held, you and all interested or affected persons, including representatives of associations or other interested groups, will have an opportunity to participate. You may present your views either orally at the hearing or in writing at any time before the close of the hearing record. All evidence presented should relate to the proposed rules. You may also submit written material to the Administrative Law Judge to be recorded in the hearing record for five working days after the public hearing ends. This five-day comment period may be extended for a longer period not to exceed 20 calendar days if ordered by the Administrative Law Judge at the hearing. Following the comment period, there is a five-working-day rebuttal period during which the agency and any interested person may respond in writing to any new information submitted. No additional evidence may be submitted during the five-day rebuttal period. All comments and responses submitted to the Administrative Law Judge must be received at the Office of Administrative Hearings no later than 4:30 p.m. on the due date. All comments or responses received will be available for review at the Office of Administrative Hearings. This rule hearing procedure is governed by *Minnesota Rules*, parts 1400.2000 to 1400.2240, and *Minnesota Statutes*, sections 14.131 to 14.20. Questions about procedure may be directed to the Administrative Law Judge.

The agency requests that any person submitting written views or data to the Administrative Law Judge prior to the hearing or during the comment or rebuttal period also submit a copy of the written views or data to the agency contact person at the address stated above.

**Statement of Need and Reasonableness.** A statement of need and reasonableness is now available from the agency contact person. This statement contains a summary of the justification for the proposed rules, including a description of who will be affected by the proposed rules and an estimate of the probable cost of the proposed rules. The statement may also be reviewed and copies obtained at the cost of reproduction from the agency.

**Lobbyist Registration.** *Minnesota Statutes*, chapter 10A, requires each lobbyist to register with the State Campaign Finance and Public Disclosure Board. Questions regarding this requirement may be directed to the Campaign Finance and Public Disclosure Board at: Suite 190, Centennial Building, 658 Cedar Street, St. Paul, Minnesota 55155, **telephone** (651) 296-5148 or 1-800-657-3889.

**Adoption Procedure if No Hearing.** If no hearing is required, the agency may adopt the rules after the end of the comment period. The rules and supporting documents will then be submitted to the Office of Administrative Hearings for review for legality. You may ask to be notified of the date the rules are submitted to the office. If you want to be so notified, or want to receive a copy of the adopted rules, or want to register with the agency to receive notice of future rule proceedings, submit your request to the agency contact person listed above.

**Adoption Procedure After a Hearing.** If a hearing is held, after the close of the hearing record, the Administrative Law Judge will issue a report on the proposed rules. You may ask to be notified of the date when the Administrative Law Judge's report will become available, and can make this request at the hearing or in writing to the Administrative Law Judge. You may also ask to be notified of the date on which the agency adopts the rules and the rules are filed with the Secretary of State, and can make this request at the hearing or in writing to the agency contact person stated above.

**Order.** I order that the rulemaking hearing be held at the date, time, and location listed above.

Dated: 15 December 2004

Kari K. Rechtzigel, Executive Director  
Board of Behavioral Health and Therapy

## **2150.5000 PREDEGREE SUPERVISED FIELD EXPERIENCE.**

Applicants must provide evidence satisfactory to the board of having completed supervised field experience as required in Minnesota Statutes, section 148B.53, subdivision 1, paragraph (a), clause (3). Verification must be in the form of a transcript or letter sent directly to the board from the program director or equivalent documenting the supervised field experience.

## **2150.5010 POSTDEGREE SUPERVISED PROFESSIONAL PRACTICE.**

**Subpart 1. Supervision.** For the purpose of meeting this part, “supervision” means documented interactive consultation, which, subject to the limitations in subpart 4, item B, may be conducted in person, by telephone, or by audio or audiovisual electronic device, between an approved supervisor and a licensed professional counselor. The supervision must be adequate to ensure the quality and competence of the activities supervised. Supervisory consultation must include discussions on the nature and content of the practice of the supervisee, including, but not limited to, a review of a representative sample of counseling services in the supervisee’s practice.

**Subp. 2. Postdegree professional practice.** “Postdegree professional practice” means required postdegree paid or volunteer work experience and training that involves the professional oversight by an approved supervisor and satisfies the supervision requirements in subpart 4.

**Subp. 3. Approved supervisor.** For the purpose of this part, the supervision must be provided by a supervisor, approved by the board, who must:

- A. be a licensed professional counselor, licensed psychologist, or other qualified supervisor as determined by the board;
- B. have four years of professional counseling experience; and
- C. have received a minimum of 45 hours of formal training in providing counseling supervision, which may include graduate coursework, continuing education courses, workshops, or a combination thereof. A supervisor approved by the board prior to the effective date of this part is considered to have met the requirements of this subpart.

### **Subp. 4. Supervised practice requirements.**

A. Licensed professional counselors must obtain supervision by an approved supervisor for the first 2,000 hours of professional practice. This part does not prohibit licensees from participating in other supervisory relationships for purposes other than meeting the requirements of this part.

B. The content of supervision must include:

(1) professional counseling knowledge, skills, values, and ethics with specific application to the practice issues faced by the supervisee;

(2) the standards of practice and ethical conduct, with particular emphasis given to the professional counselor’s role and appropriate responsibilities, professional boundaries, and power dynamics; and

(3) the supervisee’s permissible scope of practice, as defined by *Minnesota Statutes*, section 148B.50, subdivision 5.

C. The supervision must be obtained at the rate of one hour of supervision per 40 hours of professional practice, for a total of 50 hours of supervision. The supervision must be evenly distributed over the course of the supervised professional practice. At least 75 percent of the required supervision hours must be received in person. The remaining 25 percent of the required hours may be received by telephone or by audio or audiovisual electronic device. At least 50 percent of the required hours of supervision must be received on an individual basis. The remaining 50 percent may be received in a group setting.

D. The supervision must be completed in no fewer than 12 consecutive months and no more than 36 consecutive months.

E. Except as provided in *Minnesota Statutes*, section 148B.53, subdivision 1, paragraph (c), the supervised practice must be completed under an approved supervision plan. Applicants must submit, on a form specified by the board, a written plan for meeting the supervision requirements. If the board determines that the supervision plan submitted meets the applicable supervision requirements, then the supervisee’s completion of the supervised practice, as verified under this part, applies toward the supervised professional counseling practice requirement provided that there was no substantial change from the approved supervision plan. A licensee must not engage in the practice of professional counseling until the licensee’s supervision plan has been approved by the board.

F. A professional counselor licensed under *Minnesota Statutes*, section 148B.53, subdivision 1, paragraph (c), and who maintain licensure as a licensed psychological practitioner may satisfy the 2,000 hours of supervised professional practice by complying with the supervision requirements for a licensed psychological practitioner in *Minnesota Statutes*, section 148.925. Upon completion of 2,000 hours of supervised professional practice, the supervisor shall submit the verification described in item I. If a professional counselor is no longer licensed as a psychological practitioner for any reason prior to completion of the 2,000 hours of supervised professional practice, then the professional counselor shall comply with this item until completion of the 2,000 hours of supervised professional practice.

G. Applicants who are licensed psychologists under *Minnesota Statutes*, section 148.907, at the time of application for licensure as professional counselors are considered to have met the 2,000 hours of supervised professional practice. Such applicants shall submit true and correct copies of notarized supervision verifications submitted to the Board of Psychology pursuant to part 7200.0600.

H. The board shall not accept the verification of supervised practice, or approve a supervision plan, if the board determines that the

# Proposed Rules

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supervisor does not meet the requirements of subpart 3.

I. Upon completion of the 2,000 hours of supervised professional practice, the supervisor shall verify, on a form specified by the board, that the supervisee has completed the supervision plan. The supervised practice required under this part is unacceptable if the supervisor attests that the supervisee's performance, competence, or adherence to the standards of practice and ethical conduct has been unsatisfactory.

J. A licensee shall submit a new supervision plan for board approval within 30 days if any of the following occur:

(1) the licensee has a new supervisor;

(2) the scope or content of the counseling practice changes substantially during the course of the supervision; or

(3) the licensee begins a new counseling position.

K. Failure to submit changes to the supervision plan as required by item J shall result in hours accrued during this time period not counting towards the supervised practice requirement.

L. An applicant may receive complete or partial credit for supervised professional practice experience occurring postdegree but prior to licensure if the supervised professional practice meets the requirements of this subpart. Verification shall be on a form specified by the board, and shall be submitted in lieu of the supervision plan required in item E.

## Board of Behavioral Health and Therapy

### Proposed Permanent Rules Relating to Continuing Education

#### DUAL NOTICE: Notice of Intent to Adopt Rules Without a Public Hearing Unless 25 or More Persons

#### Request a Hearing, and Notice of Hearing If 25 or More Requests for Hearing Are Received

#### Proposed Rules Governing Continuing Education, *Minnesota Rules*, parts 2150.2500 to 2150.2660

**Introduction.** The Board of Behavioral Health and Therapy intends to adopt rules without a public hearing following the procedures set forth in the rules of the Office of Administrative Hearings, *Minnesota Rules*, parts 1400.2300 to 1400.2310, and the Administrative Procedure Act, *Minnesota Statutes*, sections 14.22 to 14.28. If, however, 25 or more persons submit a written request for a hearing on the rules by 4:30 p.m. on January 31, 2005, a public hearing will be held in Conference Rooms A-C, Water's Edge Building, 1500 West County Road B2, Roseville, Minnesota 55113, starting at 9:00 a.m. on Monday, March 14, 2005. To find out whether the rules will be adopted without a hearing or if the hearing will be held, you should contact the agency contact person after January 31, 2005 and before the date of hearing.

**Agency Contact Person.** Comments or questions on the rules and written requests for a public hearing on the rules must be submitted to the agency contact person. The agency contact person is: Kari Rechtzigel at the Board of Behavioral Health and Therapy, 2829 University Avenue SE, Suite 210, Minneapolis, MN 55414, (612) 617-2178, **FAX:** ( 612) 617-2187, and **email:** [kari.rechtzigel@state.mn.us](mailto:kari.rechtzigel@state.mn.us). **TTY** users may call the Board of Behavioral Health and Therapy at 1-800-627-3529.

**Subject of Rules and Statutory Authority.** The proposed rules relate to continuing education requirements for Licensed Professional Counselors in Minnesota. The statutory authority to adopt the rules is *Minnesota Statutes*, section 148B.52(a)(2) (2004). A copy of the proposed rules is published in the *State Register* and attached to this notice as mailed.

**Comments.** You have until 4:30 p.m. on Monday, January 31, 2005, to submit written comment in support of or in opposition to the proposed rules or any part or subpart of the rules. Your comment must be in writing and received by the agency contact person by the due date. Comment is encouraged. Your comments should identify the portion of the proposed rules addressed, the reason for the comment, and any change proposed. You are encouraged to propose any change desired. Any comments that you would like to make on the legality of the proposed rules must also be made during this comment period.

**Request for a Hearing.** In addition to submitting comments, you may also request that a hearing be held on the rules. Your request for a public hearing must be in writing and must be received by the agency contact person by 4:30 p.m. on Monday, January 31, 2005. Your written request for a public hearing must include your name and address. You must identify the portion of the proposed rules to which you object or state that you oppose the entire set of rules. Any request that does not comply with these requirements is not valid and cannot be counted by the agency when determining whether a public hearing must be held. You are also encouraged to state the reason for the request and any changes you want made to the proposed rules.

**Withdrawal of Requests.** If 25 or more persons submit a valid written request for a hearing, a public hearing will be held unless a sufficient number withdraw their requests in writing. If enough requests for hearing are withdrawn to reduce the number below 25, the agency must give written notice of this to all persons who requested a hearing, explain the actions the agency took to effect the withdrawal, and ask for written comments on this action. If a public hearing is required, the agency will follow the procedures in *Minnesota Statutes*, sections 14.131 to 14.20.

**Alternative Format/Accommodation.** Upon request, this Notice can be made available in an alternative format, such as large print, Braille, or cassette tape. To make such a request or if you need an accommodation to make this hearing accessible, please contact the

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# Proposed Rules

agency contact person at the address or telephone number listed above.

**Modifications.** The proposed rules may be modified, either as a result of public comment or as a result of the rule hearing process. Modifications must be supported by data and views submitted to the agency or presented at the hearing and the adopted rules may not be substantially different than these proposed rules, unless the procedure under *Minnesota Rules*, part 1400.2110, has been followed. If the proposed rules affect you in any way, you are encouraged to participate in the rulemaking process.

**Cancellation of Hearing.** The hearing scheduled for March 14, 2005, will be canceled if the agency does not receive requests from 25 or more persons that a hearing be held on the rules. If you requested a public hearing, the agency will notify you before the scheduled hearing whether or not the hearing will be held. You may also call the agency contact person at (612) 617-2178 after January 31, 2005, to find out whether the hearing will be held.

**Notice of Hearing.** If 25 or more persons submit valid written requests for a public hearing on the rules, a hearing will be held following the procedures in *Minnesota Statutes*, sections 14.131 to 14.20. The hearing will be held on the dates and at the times and place listed above. The hearing will continue until all interested persons have been heard. Administrative Law Judge Allan W. Klein is assigned to conduct the hearing. Judge Klein can be reached at the Office of Administrative Hearings, 100 Washington Square, Suite 1700, Minneapolis, Minnesota 55401-2138, **telephone** (612) 341-7609, and **FAX:** (612) 349-2665.

**Hearing Procedure.** If a hearing is held, you and all interested or affected persons, including representatives of associations or other interested groups, will have an opportunity to participate. You may present your views either orally at the hearing or in writing at any time before the close of the hearing record. All evidence presented should relate to the proposed rules. You may also submit written material to the Administrative Law Judge to be recorded in the hearing record for five working days after the public hearing ends. This five-day comment period may be extended for a longer period not to exceed 20 calendar days if ordered by the Administrative Law Judge at the hearing. Following the comment period, there is a five-working-day rebuttal period during which the agency and any interested person may respond in writing to any new information submitted. No additional evidence may be submitted during the five-day rebuttal period. All comments and responses submitted to the Administrative Law Judge must be received at the Office of Administrative Hearings no later than 4:30 p.m. on the due date. All comments or responses received will be available for review at the Office of Administrative Hearings. This rule hearing procedure is governed by *Minnesota Rules*, parts 1400.2000 to 1400.2240, and *Minnesota Statutes*, sections 14.131 to 14.20. Questions about procedure may be directed to the Administrative Law Judge.

The agency requests that any person submitting written views or data to the Administrative Law Judge prior to the hearing or during the comment or rebuttal period also submit a copy of the written views or data to the agency contact person at the address stated above.

**Statement of Need and Reasonableness.** A statement of need and reasonableness is now available from the agency contact person. This statement contains a summary of the justification for the proposed rules, including a description of who will be affected by the proposed rules and an estimate of the probable cost of the proposed rules. The statement may also be reviewed and copies obtained at the cost of reproduction from the agency.

**Lobbyist Registration.** *Minnesota Statutes*, chapter 10A, requires each lobbyist to register with the State Campaign Finance and Public Disclosure Board. Questions regarding this requirement may be directed to the Campaign Finance and Public Disclosure Board at: Suite 190, Centennial Building, 658 Cedar Street, St. Paul, Minnesota 55155, telephone (651) 296-5148 or 1-800-657-3889.

**Adoption Procedure if No Hearing.** If no hearing is required, the agency may adopt the rules after the end of the comment period. The rules and supporting documents will then be submitted to the Office of Administrative Hearings for review for legality. You may ask to be notified of the date the rules are submitted to the office. If you want to be so notified, or want to receive a copy of the adopted rules, or want to register with the agency to receive notice of future rule proceedings, submit your request to the agency contact person listed above.

**Adoption Procedure After a Hearing.** If a hearing is held, after the close of the hearing record, the Administrative Law Judge will issue a report on the proposed rules. You may ask to be notified of the date when the Administrative Law Judge's report will become available, and can make this request at the hearing or in writing to the Administrative Law Judge. You may also ask to be notified of the date on which the agency adopts the rules and the rules are filed with the Secretary of State, and can make this request at the hearing or in writing to the agency contact person stated above.

**Order.** I order that the rulemaking hearing be held at the date, time, and location listed above.

Dated: 15 December 2004

Kari K. Rehtzigel, Executive Director  
Board of Behavioral Health and Therapy

## **2150.2500 PURPOSE OF CONTINUING EDUCATION.**

The purpose of mandatory continuing education is to:

- A. promote the health and well-being of the residents of Minnesota who receive services from licensees; and
- B. promote the professional development of providers of these services.

The continued professional growth and maintenance of competence in providing professional counseling services are the ethical re-

# Proposed Rules

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sponsibilities of each licensee.

## **2150.2510 CONTINUING EDUCATION REQUIRED.**

All licensees must meet the continuing education requirements in this chapter and *Minnesota Statutes*, section 148B.54, subdivision 2.

## **2150.2520 INITIAL REQUIREMENT.**

Subpart 1. Coursework. Except as provided in subparts 2 and 3, licensees must complete 12 graduate semester credits in counseling or the quarter credit equivalent within the first two years of licensure. Coursework completed for purposes of this requirement shall comply with items A to E.

A. Courses must have been taken postdegree, or as part of the degree program. Predegree courses taken outside of the degree program which have not been accepted by the degree program upon which the licensee's license is based may not be used to satisfy this requirement.

B. Courses must be completed at a counseling program recognized by the Council for Accreditation of Counseling and Related Education Programs (CACREP) or from an institution of higher education that is accredited by a regional accrediting organization recognized by the Council for Higher Education Accreditation (CHEA).

C. Courses must be taken and passed for graduate credit. Audited courses or courses not otherwise taken for credit may not be used to satisfy this requirement.

D. Courses must fall within one of the course content areas specified in *Minnesota Statutes*, section 148B.53, subdivision 1, paragraph (b).

E. In addition to submission of the Affidavit of Continuing Education Compliance, all licensees are required to have transcripts documenting completion of the coursework sent directly to the board from the educational institutions where the coursework was completed.

Subp. 2. Prelicensure credit exception. Notwithstanding subpart 1, and subject to subpart 4, a licensee may use postdegree, prelicensure coursework to satisfy this requirement, so long as the coursework otherwise satisfies the requirements of subpart 1, items A to E.

Subp. 3. Degree program credit exception. If a licensee can document to the satisfaction of the board that the degree program upon which the licensee's license is based was in excess of 48 semester credits, or quarter credit equivalent, that licensee need only complete the number of graduate credits sufficient to reach a combined total of 60 graduate semester credits between the degree program and this requirement. The licensee must comply with the requirements of subpart 4.

Subp. 4. Additional requirements. A licensee who is not required to take and complete a full 12 semester credits or quarter credit equivalent within the first two years of licensure pursuant to subpart 2 or 3 shall, in addition, complete continuing education hours which otherwise satisfy the requirements of parts 2150.2500 to 2150.2660 as follows:

- A. licensees who are required to complete nine to 11 semester credits must complete ten continuing education hours;
- B. licensees who are required to complete five to eight semester credits must complete 20 continuing education hours;
- C. licensees who are required to take one to four semester credits must complete 30 continuing education hours; and
- D. licensees who are not required to take any graduate semester credits must complete 40 continuing education hours.

## **2150.2530 SUBSEQUENT REQUIREMENT.**

After the first two years of licensure, all licensees must complete a minimum of 40 hours of continuing education activities approved by the board every two years as described in part 2150.2540.

## **2150.2540 CRITERIA FOR APPROVAL OF CONTINUING EDUCATION ACTIVITIES.**

To satisfy the requirements of parts 2150.2500 to 2150.2660, a continuing education activity must be approved by the board or its designee. Activities may be approved for all attendees when submitted by the sponsor as prescribed in part 2150.2550, a licensee may request individual approval as prescribed in part 2150.2560, or activities may be automatically approved as prescribed in part 2150.2570. The board shall consider the following factors in determining whether an activity should be approved:

- A. the activity's relevance to the practices of professional counseling;
- B. the activity's relevance to the development and maintenance of professional skills of professional counselors;
- C. relation of the activity's proposed topics to the body of professional counseling knowledge;
- D. whether the activity is structured on sound educational principles and fits into one of the following categories:
  - (1) structured educational activities with an instructor as a part of conventions, workshops, seminars, lectures, interactive or other on-line media, and graduate and postgraduate courses from regionally accredited institutions;
  - (2) home study activities related to professional counseling that have an independently graded test component with no more than one-fourth of the required 40 continuing education hours earned by this method;
- E. whether the activity is at least one hour in length. "One hour" means at least 50 minutes spent as a student in direct participation

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## Proposed Rules

in a structured educational format. Time for home study activities is based on the developer's research on average time to complete; or

F. whether the instructors or developers of the activity are qualified by practical or academic experience to teach, lecture, make presentations, or develop activities.

### **2150.2550 SPONSOR'S APPLICATION FOR APPROVAL.**

Subpart 1. **Content.** Except as provided in part 2150.2570, individuals, organizations, associations, corporations, educational institutions, or groups intending to offer continuing education activities for approval must submit to the board a completed application for approval on a form provided by the board. The sponsor must comply with items A and B to receive and maintain approval.

A. The application for approval must be submitted at least 60 days before the activity is scheduled to begin.

B. The application for approval must include the following information to enable the board to determine whether the activity meets the standards for board approval in part 2150.2540:

(1) a statement of the objectives of the activity and the knowledge the participants will have gained upon completion of the activity;

(2) a description of the content and methodology of the activity which will allow the participants to meet the objectives;

(3) a description of the method to be used by the participants to evaluate the activity;

(4) a listing of the qualifications of each instructor or developer that shows the instructor's or developer's current knowledge and skill in the activity's subject;

(5) a description of the certificate or other form of verification of attendance distributed to each participant upon successful completion of the activity;

(6) the sponsor's agreement to retain attendance lists for a period of five years from the date of the activity; and

(7) a copy of any proposed advertisement or other promotional literature.

Subp. 2. **Approval expiration.** If the board approves an activity, it shall assign the activity a number. The approval remains in effect for one year from the date of initial approval. Upon expiration, a sponsor must submit to the board a new application for activity approval as required by subpart 1.

Subp. 3. **Statement of board approval.** Each sponsor of an approved activity shall include in any promotional literature a statement that "This activity has been approved by the Minnesota Board of Behavioral Health and Therapy for ... hours of credit."

Subp. 4. **Changes.** The activity sponsor must submit proposed changes in an approved activity to the board for its approval.

Subp. 5. **Denial of approval.** The board shall deny approval of an activity if it does not meet the criteria in part 2150.2540. The board shall notify the sponsor in writing of its reasons for denying approval of an activity.

Subp. 6. **Revocation of approval.** The board shall revoke its approval of an activity if a sponsor fails to comply with subpart 4, or if a sponsor falsifies information requested by the board in the application for approval of an activity.

### **2150.2560 INDIVIDUAL LICENSEE'S APPLICATION FOR APPROVAL.**

Subpart 1. **Requirement.** A licensee may apply individually for approval of any continuing education activities that have not been approved by the board. The licensee must submit the information required in subpart 2 as well as other information the board reasonably requires to evaluate the activity for approval.

Subp. 2. **Content.** To apply for approval, a licensee shall complete and submit a form provided by the board, and provide the following information:

A. the name and address of the organization sponsoring the activity;

B. a detailed description of the content of the activity;

C. the name of each instructor or presenter and the instructor's or presenter's credentials; and

D. the location, including the name and address of the facility, at which the activity will be conducted.

Subp. 3. **Activity not previously approved.** Licensees intending to take an activity not previously approved by the board are strongly encouraged to seek board approval before attending the activity.

Subp. 4. **Denial of approval.** The board shall deny approval for an activity if it does not meet the standards in part 2150.2540. The board shall notify the applicant in writing of its reasons for denying approval under this subpart.

Subp. 5. **Addition to list of approved activities.** Once an activity has been approved for an individual licensee, the activity shall be assigned a number and added to the board's list of approved continuing education activities.

### **2150.2570 AUTOMATIC APPROVAL.**

Any activity approved for continuing education credit for professional counselors by the American Counseling Association (ACA), Council for Accreditation of Counseling and Related Education Programs (CACREP), American Association of State Counseling Boards (AASCB), the National Board for Certified Counselors (NBCC), or other national organization as determined by the board, shall automatically be approved for continuing education credit without further application by the sponsor or licensee.

# Proposed Rules

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## **2150.2600 CARRYOVER OF CONTINUING EDUCATION CREDITS.**

A licensee who has completed more than 40 approved continuing education hours in the preceding reporting period may carry hours in excess of 40 over to the next reporting period, up to a maximum of ten hours.

## **2150.2650 CONTINUING EDUCATION AUDIT.**

Annually, the board may randomly audit a percentage of its licensees for compliance with continuing education requirements as described in items A and B.

A. The board shall include with a selected licensee's renewal notice and application a notice that the licensee has been selected for an audit of continuing education hours. The notice must include the reporting periods selected for audit.

B. Selected licensees shall submit with their renewal application copies of the original documentation of completed continuing education hours. Upon specific request, the licensee shall submit original documentation. Failure to submit required documentation shall result in the renewal application being considered incomplete and void, and constitute grounds for nonrenewal of the license and disciplinary action.

## **2150.2660 VARIANCE FROM CONTINUING EDUCATION REQUIREMENTS.**

Subpart 1. General. If a licensee is unable to meet the continuing education requirements by the renewal date, the licensee may request a time-limited variance to fulfill the requirement after the renewal date. A licensee seeking a variance is considered to be renewing late, and is subject to the late renewal fee, regardless of when the request is received or whether the variance is granted.

Subp. 2. Procedure. The licensee shall submit the variance request on a form designated by the board, and include the variance fee in *Minnesota Statutes*, section 14.056, and the late fee for licensure renewal. The variance request is subject to *Minnesota Statutes*, section 14.055, subdivision 4, and must include a written plan listing the activities, including the dates and the number of hours for each, offered to meet the requirement. Hours completed after the renewal date pursuant to the written plan count toward meeting only the requirements of the previous renewal period. A variance granted under this subpart expires six months after the renewal date. A licensee who is granted a variance but fails to complete the required continuing education within the six-month period may apply for a second variance in accordance with this subpart.

Subp. 3. Nonrenewal; suspension. If an initial variance request is denied, the license of the licensee shall not be renewed until the licensee completes the continuing education requirements. If an initial variance is granted, and the licensee fails to complete the required continuing education with the six-month period, the license shall be administratively suspended until the licensee completes the required continuing education unless the licensee has obtained a second variance according to subpart 2.

## **Board of Behavioral Health and Therapy Proposed Permanent Rules Relating to License Renewals and Termination of License**

### **DUAL NOTICE: Notice of Intent to Adopt Rules Without a Public Hearing Unless 25 or More Persons Request a Hearing, and Notice of Hearing If 25 or More Requests for Hearing Are Received**

#### **Proposed Rules Governing License Renewals and Termination of License, *Minnesota Rules*, parts 2150.0050 to 2150.0160**

**Introduction.** The Board of Behavioral Health and Therapy intends to adopt rules without a public hearing following the procedures set forth in the rules of the Office of Administrative Hearings, *Minnesota Rules*, parts 1400.2300 to 1400.2310, and the Administrative Procedure Act, *Minnesota Statutes*, sections 14.22 to 14.28. If, however, 25 or more persons submit a written request for a hearing on the rules by 4:30 p.m. on January 31, 2005, a public hearing will be held in Conference Rooms A-C, Water's Edge Building, 1500 West County Road B2, Roseville, Minnesota 55113, starting at 9:00 a.m. on Wednesday, March 23, 2005. To find out whether the rules will be adopted without a hearing or if the hearing will be held, you should contact the agency contact person after January 31, 2005 and before the date of hearing.

**Agency Contact Person.** Comments or questions on the rules and written requests for a public hearing on the rules must be submitted to the agency contact person. The agency contact person is: Kari Rechtzigel at the Board of Behavioral Health and Therapy, 2829 University Avenue SE, Suite 210, Minneapolis, MN 55414, (612) 617-2178, **FAX:** (612) 617.2187, and **email:** [kari.rechtzigel@state.mn.us](mailto:kari.rechtzigel@state.mn.us). TTY users may call the Board of Behavioral Health and Therapy at 1-800-627-3529.

**Subject of Rules and Statutory Authority.** The proposed rules relate to license renewal requirements and termination of license procedures for Licensed Professional Counselors in Minnesota. The statutory authority to adopt the rules is *Minnesota Statutes*, section 148B.54, subdivision 1 (2004). A copy of the proposed rules is published in the *State Register* and attached to this notice as mailed.

**Comments.** You have until 4:30 p.m. on Monday, January 31, 2005, to submit written comment in support of or in opposition to the

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## Proposed Rules

proposed rules or any part or subpart of the rules. Your comment must be in writing and received by the agency contact person by the due date. Comment is encouraged. Your comments should identify the portion of the proposed rules addressed, the reason for the comment, and any change proposed. You are encouraged to propose any change desired. Any comments that you would like to make on the legality of the proposed rules must also be made during this comment period.

**Request for a Hearing.** In addition to submitting comments, you may also request that a hearing be held on the rules. Your request for a public hearing must be in writing and must be received by the agency contact person by 4:30 p.m. on Monday, January 31, 2005. Your written request for a public hearing must include your name and address. You must identify the portion of the proposed rules to which you object or state that you oppose the entire set of rules. Any request that does not comply with these requirements is not valid and cannot be counted by the agency when determining whether a public hearing must be held. You are also encouraged to state the reason for the request and any changes you want made to the proposed rules.

**Withdrawal of Requests.** If 25 or more persons submit a valid written request for a hearing, a public hearing will be held unless a sufficient number withdraw their requests in writing. If enough requests for hearing are withdrawn to reduce the number below 25, the agency must give written notice of this to all persons who requested a hearing, explain the actions the agency took to effect the withdrawal, and ask for written comments on this action. If a public hearing is required, the agency will follow the procedures in *Minnesota Statutes*, sections 14.131 to 14.20.

**Alternative Format/Accommodation.** Upon request, this Notice can be made available in an alternative format, such as large print, Braille, or cassette tape. To make such a request or if you need an accommodation to make this hearing accessible, please contact the agency contact person at the address or telephone number listed above.

**Modifications.** The proposed rules may be modified, either as a result of public comment or as a result of the rule hearing process. Modifications must be supported by data and views submitted to the agency or presented at the hearing and the adopted rules may not be substantially different than these proposed rules, unless the procedure under *Minnesota Rules*, part 1400.2110, has been followed. If the proposed rules affect you in any way, you are encouraged to participate in the rulemaking process.

**Cancellation of Hearing.** The hearing scheduled for March 23, 2005, will be canceled if the agency does not receive requests from 25 or more persons that a hearing be held on the rules. If you requested a public hearing, the agency will notify you before the scheduled hearing whether or not the hearing will be held. You may also call the agency contact person at (612) 617-2178 after January 31, 2005, to find out whether the hearing will be held.

**Notice of Hearing.** If 25 or more persons submit valid written requests for a public hearing on the rules, a hearing will be held following the procedures in *Minnesota Statutes*, sections 14.131 to 14.20. The hearing will be held on the dates and at the times and place listed above. The hearing will continue until all interested persons have been heard. Administrative Law Judge Barbara L. Neilson is assigned to conduct the hearing. Judge Neilson can be reached at the Office of Administrative Hearings, 100 Washington Square, Suite 1700, Minneapolis, Minnesota 55401-2138, **telephone** (612) 341-7604, and **FAX** (612) 349-2665.

**Hearing Procedure.** If a hearing is held, you and all interested or affected persons, including representatives of associations or other interested groups, will have an opportunity to participate. You may present your views either orally at the hearing or in writing at any time before the close of the hearing record. All evidence presented should relate to the proposed rules. You may also submit written material to the Administrative Law Judge to be recorded in the hearing record for five working days after the public hearing ends. This five-day comment period may be extended for a longer period not to exceed 20 calendar days if ordered by the Administrative Law Judge at the hearing. Following the comment period, there is a five-working-day rebuttal period during which the agency and any interested person may respond in writing to any new information submitted. No additional evidence may be submitted during the five-day rebuttal period. All comments and responses submitted to the Administrative Law Judge must be received at the Office of Administrative Hearings no later than 4:30 p.m. on the due date. All comments or responses received will be available for review at the Office of Administrative Hearings. This rule hearing procedure is governed by *Minnesota Rules*, parts 1400.2000 to 1400.2240, and *Minnesota Statutes*, sections 14.131 to 14.20. Questions about procedure may be directed to the Administrative Law Judge.

The agency requests that any person submitting written views or data to the Administrative Law Judge prior to the hearing or during the comment or rebuttal period also submit a copy of the written views or data to the agency contact person at the address stated above.

**Statement of Need and Reasonableness.** A statement of need and reasonableness is now available from the agency contact person. This statement contains a summary of the justification for the proposed rules, including a description of who will be affected by the proposed rules and an estimate of the probable cost of the proposed rules. The statement may also be reviewed and copies obtained at the cost of reproduction from the agency.

**Lobbyist Registration.** *Minnesota Statutes*, chapter 10A, requires each lobbyist to register with the State Campaign Finance and Public Disclosure Board. Questions regarding this requirement may be directed to the Campaign Finance and Public Disclosure Board at: Suite 190, Centennial Building, 658 Cedar Street, St. Paul, Minnesota 55155, **telephone** (651) 296-5148 or 1-800-657-3889.

**Adoption Procedure if No Hearing.** If no hearing is required, the agency may adopt the rules after the end of the comment period. The rules and supporting documents will then be submitted to the Office of Administrative Hearings for review for legality. You may ask to be notified of the date the rules are submitted to the office. If you want to be so notified, or want to receive a copy of the adopted rules,

# Proposed Rules

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or want to register with the agency to receive notice of future rule proceedings, submit your request to the agency contact person listed above.

**Adoption Procedure After a Hearing.** If a hearing is held, after the close of the hearing record, the Administrative Law Judge will issue a report on the proposed rules. You may ask to be notified of the date when the Administrative Law Judge's report will become available, and can make this request at the hearing or in writing to the Administrative Law Judge. You may also ask to be notified of the date on which the agency adopts the rules and the rules are filed with the Secretary of State, and can make this request at the hearing or in writing to the agency contact person stated above.

**Order.** I order that the rulemaking hearing be held at the date, time, and location listed above.

Dated: 15 December 2004

Kari K. Rechtzigel, Executive Director  
Board of Behavioral Health and Therapy

## **2150.0050 TERM OF LICENSE.**

A license is valid for one year beginning with the first day of the month following the date the license was granted by the board and expires on the last day of the month preceding the month in which the license was originally effective. Thereafter, the license is renewable for a period of one year.

## **2150.0060 NOTICE OF LICENSE RENEWAL.**

The board shall mail an application for license renewal to a licensee at least 45 days before the expiration date of the license. In the alternative, upon the licensee's election, the board shall send the application via e-mail. Placing the application for license renewal in first class United States mail, addressed to the licensee at the licensee's last known mailing address with postage prepaid, constitutes valid mailing. Sending the application via e-mail to the licensee's last known e-mail address on file also constitutes valid notification. Failure to receive the renewal documents by either means does not relieve a license holder of the obligation to renew a license or to pay the renewal fee.

## **2150.0070 APPLYING FOR RENEWAL OF A LICENSE.**

In order to renew a license, a licensee must submit a completed, signed application for license renewal, with the required, nonrefundable license renewal fee as specified by *Minnesota Statutes*, section 148B.53, subdivision 3, clause (2), payable to the Board of Behavioral Health and Therapy. The application must be postmarked or received by the board by the end of the day on which the license expires, or the following business day if the expiration date falls on a Saturday, Sunday, or holiday. An application which is not completed or signed, or which is not accompanied by the correct fee, is void, and must be returned to the licensee.

## **2150.0080 PENDING RENEWAL.**

If a licensee's application for license renewal is postmarked or received by the board by the end of the business day on the expiration date of the license, the licensee may continue to practice after the expiration date while the application for license renewal is pending with the board.

## **2150.0090 LATE FEE.**

If the application for license renewal is received after the expiration date, the licensee shall pay a late fee as specified by *Minnesota Statutes*, section 148B.53, subdivision 3, clause (4), in addition to the renewal fee, before the application for license renewal will be considered by the board.

## **2150.0100 EXPIRED LICENSE.**

A licensee who fails to submit an application for license renewal, or whose application for license renewal is not postmarked or received by the board as required, is not authorized to practice after the expiration date and is subject to disciplinary action by the board for any practice after the expiration date.

## **2150.0110 TERMINATION FOR NONRENEWAL.**

**Subpart 1. Notice.** Within 30 days after the renewal date, a licensee who has not renewed the license shall be notified by registered or certified letter sent to the last known address of the licensee in the board's file that the renewal is overdue and that failure to pay the current fee and current late fee within 60 days after the renewal date will result in termination of the license. A second notice must be sent at least seven days before a board meeting occurring 60 days or more after the renewal date to each licensee who has not remitted the renewal fee and late fee.

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## Proposed Rules

Subp. 2. Termination. The board shall terminate the license of a licensee whose license renewal is at least 60 days overdue and to whom notification has been sent as provided in subpart 1. Failure of a licensee to receive notification is not grounds for later challenge of the termination. The former licensee shall be notified of the termination by registered or certified letter within seven days after the board action, in the same manner as provided in subpart 1.

### **2150.0120 VOLUNTARY TERMINATION.**

A license may be voluntarily terminated at any time upon written notification to the board, unless a complaint is pending against the licensee. The notification must be received by the board prior to termination of the license for failure to renew. A former licensee may be licensed again only after complying with all laws and rules, as provided in part 2150.0130, for relicensure following termination.

### **2150.0130 RELICENSURE FOLLOWING TERMINATION.**

Subpart 1. Relicensure. For a period of two years, a former licensee whose license has been voluntarily terminated or terminated for nonrenewal as provided in part 2150.0110 or 2150.0120 may be relicensed after complying with all laws and rules required of applicants for examination and licensure and verifying that the former licensee has not engaged in the practice of professional counseling in this state since the date of termination. The verification must be accompanied by a notarized affirmation that the statement is true and correct to the best knowledge and belief of the former licensee. The fee for relicensure following termination is the licensure fee in effect at the time of application for relicensure, and rules governing relicensure are the rules in effect at the time the initial license was granted.

Subp. 2. Continuing education for relicensure. A former licensee seeking relicensure after license termination must provide evidence of having completed at least 20 hours of continuing education activities for each year, or portion thereof, that the former licensee did not hold a license.

### **2150.0140 CANCELLATION OF LICENSE.**

The board shall not renew, reissue, reinstate, or restore the license of a former licensee which was terminated for nonrenewal, or voluntarily terminated, and for which relicensure was not sought for more than two years from the date the license was terminated for nonrenewal, or voluntarily terminated. A former licensee seeking relicensure after this two-year period must obtain a new license by applying for licensure and fulfilling all requirements then in existence for an initial license to practice professional counseling in Minnesota.

### **2150.0150 JURISDICTION.**

The board shall retain jurisdiction over a licensee whose license was terminated for nonrenewal, or voluntarily terminated, until the license is canceled pursuant to part 2150.0160, and may take disciplinary action against the former licensee based on conduct occurring before termination of the license.

### **2150.0160 INACTIVE LICENSES.**

Subpart 1. Inactive status. A professional counselor currently licensed in Minnesota may apply for an inactive status license with the board. Requests for inactive status licensure must be made at the time of license renewal, and must be accompanied by the appropriate fee. A licensee may not practice professional counseling in Minnesota while the licensee's license is in inactive status.

Subp. 2. Application. The licensee must complete a board-approved application which must include a signed, notarized affidavit stating that the licensee is not currently practicing professional counseling in Minnesota. The board may refuse to approve an application if:

- A. a complaint is pending against the licensee;
- B. the licensee has an outstanding disciplinary order or corrective action agreement; or
- C. the licensee is not current in fees and penalties paid, or in continuing education units obtained for annual license renewal.

Subp. 3. Renewal of inactive license. A licensee whose license is in inactive status is subject to the renewal requirements in this chapter except that the licensee need not show compliance with continuing education requirements until seeking reactivation provided in subpart 4.

Subp. 4. Reactivation. A licensee whose license is in inactive status may return to active license status at any time, subject to the requirements in items A and B.

A. The licensee shall complete a board-approved application which must include a signed, notarized affidavit stating that the licensee has not practiced professional counseling in Minnesota during the period of time in which the license was inactive. The application must be accompanied by the active license fee. If application is made at a time other than the licensee's renewal cycle, the licensee shall pay the difference between the inactive license fee and the active license fee.

B. The licensee shall provide documentation acceptable to the board that the licensee has met the continuing education requirements during the period of time in which the license was inactive.

# Proposed Rules

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Subp. 5. Jurisdiction. The board shall retain jurisdiction over a licensee whose license is in inactive status, and may take disciplinary action against the licensee for conduct occurring before or during the time in which the license is inactive.

## Board of Behavioral Health and Therapy

### Proposed Permanent Rules Relating to Conduct

#### DUAL NOTICE: Notice of Intent to Adopt Rules Without a Public Hearing Unless 25 or More Persons

#### Request a Hearing, and Notice of Hearing If 25 or More Requests for Hearing Are Received

#### Proposed Rules Governing Conduct, *Minnesota Rules*, parts 2150.7500 to 2150.7610

**Introduction.** The Board of Behavioral Health and Therapy intends to adopt rules without a public hearing following the procedures set forth in the rules of the Office of Administrative Hearings, *Minnesota Rules*, parts 1400.2300 to 1400.2310, and the Administrative Procedure Act, *Minnesota Statutes*, sections 14.22 to 14.28. If, however, 25 or more persons submit a written request for a hearing on the rules by 4:30 p.m. on January 31, 2005, a public hearing will be held in the Mississippi Room, Minnesota Department of Health Building, Snelling Office Park, 1645 Energy Park Drive, St. Paul, Minnesota 55101, starting at 9:00 a.m. on Wednesday, March 9, 2005, and continuing as necessary beginning at 9:00 a.m. on Thursday, March 10, 2005. To find out whether the rules will be adopted without a hearing or if the hearing will be held, you should contact the agency contact person after January 31, 2005 and before the date of hearing.

**Agency Contact Person.** Comments or questions on the rules and written requests for a public hearing on the rules must be submitted to the agency contact person. The agency contact person is: Kari Rechtzigel at the Board of Behavioral Health and Therapy, 2829 University Avenue SE, Suite 210, Minneapolis, MN 55414, (612) 617-2178, **FAX:** (612) 617.2187, and **email:** [kari.rechtzigel@state.mn.us](mailto:kari.rechtzigel@state.mn.us). **TTY** users may call the Board of Behavioral Health and Therapy at 1-800-627-3529.

**Subject of Rules and Statutory Authority.** The proposed rules relate to the professional conduct of Licensed Professional Counselors in Minnesota. The statutory authority to adopt the rules is *Minnesota Statutes*, section 148B.52(a)(2) (2004). A copy of the proposed rules is published in the *State Register* and attached to this notice as mailed.

**Comments.** You have until 4:30 p.m. on Monday, January 31, 2005, to submit written comment in support of or in opposition to the proposed rules or any part or subpart of the rules. Your comment must be in writing and received by the agency contact person by the due date. Comment is encouraged. Your comments should identify the portion of the proposed rules addressed, the reason for the comment, and any change proposed. You are encouraged to propose any change desired. Any comments that you would like to make on the legality of the proposed rules must also be made during this comment period.

**Request for a Hearing.** In addition to submitting comments, you may also request that a hearing be held on the rules. Your request for a public hearing must be in writing and must be received by the agency contact person by 4:30 p.m. on Monday, January 31, 2005. Your written request for a public hearing must include your name and address. You must identify the portion of the proposed rules to which you object or state that you oppose the entire set of rules. Any request that does not comply with these requirements is not valid and cannot be counted by the agency when determining whether a public hearing must be held. You are also encouraged to state the reason for the request and any changes you want made to the proposed rules.

**Withdrawal of Requests.** If 25 or more persons submit a valid written request for a hearing, a public hearing will be held unless a sufficient number withdraw their requests in writing. If enough requests for hearing are withdrawn to reduce the number below 25, the agency must give written notice of this to all persons who requested a hearing, explain the actions the agency took to effect the withdrawal, and ask for written comments on this action. If a public hearing is required, the agency will follow the procedures in *Minnesota Statutes*, sections 14.131 to 14.20.

**Alternative Format/Accommodation.** Upon request, this Notice can be made available in an alternative format, such as large print, Braille, or cassette tape. To make such a request or if you need an accommodation to make this hearing accessible, please contact the agency contact person at the address or telephone number listed above.

**Modifications.** The proposed rules may be modified, either as a result of public comment or as a result of the rule hearing process. Modifications must be supported by data and views submitted to the agency or presented at the hearing and the adopted rules may not be substantially different than these proposed rules, unless the procedure under *Minnesota Rules*, part 1400.2110, has been followed. If the proposed rules affect you in any way, you are encouraged to participate in the rulemaking process.

**Cancellation of Hearing.** The hearing scheduled for March 9 and March 10, 2005, will be canceled if the agency does not receive requests from 25 or more persons that a hearing be held on the rules. If you requested a public hearing, the agency will notify you before the scheduled hearing whether or not the hearing will be held. You may also call the agency contact person at (612) 617-2178 after January 31, 2005, to find out whether the hearing will be held.

**Notice of Hearing.** If 25 or more persons submit valid written requests for a public hearing on the rules, a hearing will be held following the procedures in *Minnesota Statutes*, sections 14.131 to 14.20. The hearing will be held on the dates and at the times and place listed above. The hearing will continue until all interested persons have been heard. Administrative Law Judge Beverly Jones Heydinger

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## Proposed Rules

is assigned to conduct the hearing. Judge Heydinger can be reached at the Office of Administrative Hearings, 100 Washington Square, Suite 1700, Minneapolis, Minnesota 55401-2138, **telephone** (612) 341-7606, and **FAX** (612) 349-2665.

**Hearing Procedure.** If a hearing is held, you and all interested or affected persons, including representatives of associations or other interested groups, will have an opportunity to participate. You may present your views either orally at the hearing or in writing at any time before the close of the hearing record. All evidence presented should relate to the proposed rules. You may also submit written material to the Administrative Law Judge to be recorded in the hearing record for five working days after the public hearing ends. This five-day comment period may be extended for a longer period not to exceed 20 calendar days if ordered by the Administrative Law Judge at the hearing. Following the comment period, there is a five-working-day rebuttal period during which the agency and any interested person may respond in writing to any new information submitted. No additional evidence may be submitted during the five-day rebuttal period. All comments and responses submitted to the Administrative Law Judge must be received at the Office of Administrative Hearings no later than 4:30 p.m. on the due date. All comments or responses received will be available for review at the Office of Administrative Hearings. This rule hearing procedure is governed by *Minnesota Rules*, parts 1400.2000 to 1400.2240, and *Minnesota Statutes*, sections 14.131 to 14.20. Questions about procedure may be directed to the Administrative Law Judge.

The agency requests that any person submitting written views or data to the Administrative Law Judge prior to the hearing or during the comment or rebuttal period also submit a copy of the written views or data to the agency contact person at the address stated above.

**Statement of Need and Reasonableness.** A statement of need and reasonableness is now available from the agency contact person. This statement contains a summary of the justification for the proposed rules, including a description of who will be affected by the proposed rules and an estimate of the probable cost of the proposed rules. The statement may also be reviewed and copies obtained at the cost of reproduction from the agency.

**Lobbyist Registration.** *Minnesota Statutes*, chapter 10A, requires each lobbyist to register with the State Campaign Finance and Public Disclosure Board. Questions regarding this requirement may be directed to the Campaign Finance and Public Disclosure Board at: Suite 190, Centennial Building, 658 Cedar Street, St. Paul, Minnesota 55155, **telephone** (651) 296-5148 or 1-800-657-3889.

**Adoption Procedure if No Hearing.** If no hearing is required, the agency may adopt the rules after the end of the comment period. The rules and supporting documents will then be submitted to the Office of Administrative Hearings for review for legality. You may ask to be notified of the date the rules are submitted to the office. If you want to be so notified, or want to receive a copy of the adopted rules, or want to register with the agency to receive notice of future rule proceedings, submit your request to the agency contact person listed above.

**Adoption Procedure After a Hearing.** If a hearing is held, after the close of the hearing record, the Administrative Law Judge will issue a report on the proposed rules. You may ask to be notified of the date when the Administrative Law Judge's report will become available, and can make this request at the hearing or in writing to the Administrative Law Judge. You may also ask to be notified of the date on which the agency adopts the rules and the rules are filed with the Secretary of State, and can make this request at the hearing or in writing to the agency contact person stated above.

**Order.** I order that the rulemaking hearing be held at the date, time, and location listed above.

Dated: 15 December 2004

Kari K. Rehtzigel, Executive Director  
Board of Behavioral Health and Therapy

### **2150.7500 CONDUCT.**

**Subpart 1. Scope.** Parts 2150.7500 to 2150.7610, as required by *Minnesota Statutes*, section 148B.52, apply to the conduct of all licensees and applicants, including conduct during the period of education, training, and employment, that is required for licensure.

**Subp. 2. Purpose.** The rules of conduct constitute the standards by which the professional conduct of professional counselors is measured.

**Subp. 3. Violations.** A violation of the rules of conduct is a sufficient reason for disciplinary action, corrective action, or denial of licensure.

**Subp. 4. Conflicts between rules and organizational demands.** If the organizational policies at the provider's work setting conflict with the rules of conduct, the provider shall clarify to the employer the nature of the conflict, make known the requirement to comply with the rules of conduct, and seek to resolve the conflict in a manner that results in compliance with the rules of conduct.

### **2150.7505 DEFINITIONS.**

**Subpart 1. Scope.** The terms used in parts 2150.7500 to 2150.7610 have the meanings given in this part.

**Subp. 2. Applicant.** "Applicant" means an individual who has submitted to the board an application for licensure.

**Subp. 3. Board.** "Board" means the Board of Behavioral Health and Therapy.

**Subp. 4. Client.** "Client" means an individual or entity who is the recipient of any of the professional counseling services described in

# Proposed Rules

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Minnesota Statutes, section 148B.50, subdivisions 4 and 5.

Subp. 5. **Competence.** “Competence” means the ability to provide services within the practice of licensed professional counseling as defined in *Minnesota Statutes, section 148B.50*, that:

- A. are rendered with reasonable skill and safety;
- B. meet minimum standards of acceptable and prevailing practice; and
- C. take into account human diversity.

Subp. 6. **Dependent on the provider.** “Dependent on the provider” means that the nature of a former client’s emotional or cognitive condition and the nature of the services by the provider are such that the provider knows or should have known that the former client is unable to withhold consent to sexual exploitative behavior by the provider.

Subp. 7. **Dual clients.** “Dual clients” means two or more individuals or entities that are each a corecipient of professional counseling services. Dual clients may include, but are not limited to, two or more family members, when each is the direct recipient of services; each client receiving group counseling services; a court and a client under court order to receive counseling services; or an employer and employee when the employee receives services in order to provide the employer with information regarding an employment matter.

Subp. 8. **False or misleading information.** “False or misleading information” means any public statement that contains a material misrepresentation or omission of fact that is likely to create an unjustified expectation about results the provider can achieve or that compares the provider’s services with other providers’ services, unless the comparison can be factually substantiated.

Subp. 9. **Familial.** “Familial” means of, involving, related to, or common to a family member as defined in subpart 10.

Subp. 10. **Family member or member of the family.** “Family member” or “member of the family” are relatives in the first degree, which means a spouse, parent, offspring, sibling, grandparent, grandchild, uncle, aunt, niece, or nephew, or an individual who serves in the role of one of the foregoing.

Subp. 11. **Forensic.** “Forensic” means services within the practice of professional counseling, of which the purpose is to address questions and issues relating to parties to legal proceedings and to law and the legal system, including the courts, correctional agencies and facilities, attorneys, and administrative, judicial, and legislative agencies acting in an adjudicative capacity.

Subp. 12. **Human diversity.** “Human diversity” means individual client differences that are associated with the client’s cultural group, including race, ethnicity, national origin, religious affiliation, language, age, gender, gender identity, physical and mental capabilities, sexual orientation, marital status, or socioeconomic status.

Subp. 13. **Informed consent.** “Informed consent” means an agreement between a provider and a client that authorizes the provider to engage in a professional activity affecting the client. Informed consent requires that the client be given sufficient information to decide knowingly whether to agree to the proposed professional activity, that the information be discussed in language that the client can reasonably be expected to understand, and that the consent be given without undue influence by the provider.

Subp. 14. **Licensee of the board or licensee.** “Licensee of the board” or “licensee” means a licensed professional counselor.

Subp. 15. **Multiple relationship.** “Multiple relationship” means a relationship between a provider and a client that is both professional and one or more of the following:

- A. cohabitational;
- B. familial;

C. one in which there is or has been personal involvement with the client or a family member of the client that is reasonably likely to affect adversely the client’s welfare or ability to benefit from services; or

D. one in which there is significant financial involvement other than legitimate payment for professional services rendered.

Subp. 16. **Objective.** “Objective” means a manner of administering a test and recording, scoring, and interpreting responses that is independent, insofar as is possible, of the subjective judgment of the particular examiner.

Subp. 17. **Practice foundation.** “Practice foundation” means that a professional counseling service or continuing education activity is based upon observations, methods, procedures, or theories that are generally accepted by the professional community in professional counseling.

Subp. 18. **Private information.** “Private information” means any information, including but not limited to, client records, test results, or test interpretations developed during a professional relationship between a provider and a client.

Subp. 19. **Professional relationship.** “Professional relationship” means the relationship between a provider and the provider’s client.

Subp. 20. **Provider.** “Provider” means a licensee or applicant.

Subp. 21. **Public statements.** “Public statements” means any statements, communications, or representations by providers to the public regarding themselves or their professional services or products. Public statements include, but are not limited to, advertising, representations in reports or letters, descriptions of credentials and qualifications, brochures and other descriptions of services, directory listings, personal resumes or curricula vitae, comments for use in the media, Web sites, grant and credentialing applications, or product endorsements.

Subp. 22. **Report.** “Report” means any written or oral professional communication, including a letter, regarding a client or subject that

includes one or more of the following: historical data, behavioral observations, test interpretations, opinions, diagnostic or evaluative statements, or recommendations. The testimony of a provider as an expert or fact witness in a legal proceeding also constitutes a report. For purposes of these rules, letters of recommendation for academic or career purposes are not considered reports.

**Subp. 23. Research subject.** “Research subject” means an individual participating in a research study for the period of time during which the individual is providing data for the study.

**Subp. 24. Scientific foundation.** “Scientific foundation” means that a professional counseling or continuing education activity is based upon quantitative or qualitative research, such as, but not limited to, published peer-reviewed experiments or correlational, observational, or ethnographic studies, or upon research presented at professional meetings.

**Subp. 25. Significant risks and benefits.** “Significant risks and benefits” means those risks and benefits that are known or reasonably foreseeable by the provider, including the possible range and likelihood of outcomes, and that are necessary for the client to know in order to decide whether to give consent to proposed services or to reasonable alternative services.

**Subp. 26. Standardized test.** “Standardized test” means a test that is administered, recorded, and scored in a uniform and objective manner, is interpreted by means of normative data, and includes a manual or other published information that fully describes its development, rationale, validity, reliability, and normative data.

**Subp. 27. Student.** “Student” means an individual over whom the provider has evaluative academic authority, including an individual who is enrolled in a graduate program in professional counseling at an educational institution or who is taking a professional counseling course for credit. This does not apply to an individual who is taking a professional counseling course to receive continuing education credit from a board or who is auditing a course.

**Subp. 28. Supervised field experience.** “Supervised field experience” means an internship, practicum, or other supervised professional experience used for purposes of obtaining licensure as a professional counselor.

**Subp. 29. Supervisee.** “Supervisee” means an individual whose supervision is required to obtain credentialing by a licensure board or to comply with a board order.

**Subp. 30. Test.** “Test” means any instrument, device, survey, questionnaire, technique, scale, inventory, or other process which is designed or constructed for the purpose of measuring, evaluating, assessing, describing, or predicting personality, behavior, traits, cognitive functioning, aptitudes, attitudes, skills, values, interests, abilities, or other characteristics of individuals.

**Subp. 31. Unprofessional conduct.** “Unprofessional conduct” means any conduct that fails to conform to the minimum standards of acceptable and prevailing practice.

**Subp. 32. Variance.** “Variance” means board-authorized permission to comply with a rule in a manner other than that generally specified in the rule.

**Subp. 33. Waiver.** “Waiver” means board-authorized permission not to comply with a rule.

**Subp. 34. Written informed consent.** “Written informed consent” means a written statement signed by the individual making the statement that authorizes a provider to engage in activity which directly affects the individual signing the statement. The statement must include a declaration that the individual signing the statement has been told of and understands the purpose of the authorized activity. Written informed consent means informed consent that is set forth in writing and signed by the client.

## **2150.7510 COMPETENT PROVISION OF SERVICES.**

**Subpart 1. Limits on practice.** Professional counselors shall limit practice to the client populations and services for which they have competence or for which they are developing competence.

**Subp. 2. Developing competence.** When the professional counselor is developing a competence in a service, method, procedure, or to treat a specific client population, the professional counselor shall obtain professional education, training, continuing education, consultation, supervision, or experience, or a combination thereof, necessary to demonstrate competence.

**Subp. 3. Experimental, emerging, or innovative services.** Professional counselors may offer experimental, emerging, or innovative services, methods, or procedures that are based on a scientific or practice foundation. However, when doing so, they have a heightened responsibility to understand and communicate the potential risks to clients, to use reasonable skill and safety, and to undertake appropriate preparation as required in subpart 2 to ensure that they provide such services, methods, or procedures competently and in a manner that protects clients from harm.

**Subp. 4. Limitations to scope of practice.** Professional counselors shall recognize the limitations to the scope of practice of professional counseling. When the needs of clients appear to be outside this scope, providers shall inform the clients that there may be other professional, technical, community, and administrative resources available to them. Providers shall assist with identifying such resources when it is in the best interests of clients to be provided with alternative or complementary services.

**Subp. 5. Burden of proof.** Whenever a complaint is submitted to the board involving violation of subparts 1 to 4, the burden of proof is upon the provider to demonstrate that the elements of competence have reasonably been met.

# Proposed Rules

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## **2150.7515 PROTECTING THE PRIVACY OF CLIENTS.**

**Subpart 1. Safeguarding private information.** The provider shall safeguard the private information obtained in the course of the practice of professional counseling. Private information may be disclosed to others only in accordance with part 2150.7520, with certain exceptions as specified in subparts 2 to 13.

**Subp. 2. Limited disclosure to others without consent.** Private information may be disclosed without the consent of the client when disclosure is necessary to protect against a clear and substantial risk of imminent serious harm being inflicted by the client on the client or another individual, or as otherwise provided by law or court order. In such case, the private information may be disclosed only to law enforcement agencies, the potential victim, the family of the client, or appropriate third parties in a position to prevent or avert the harm.

**Subp. 3. Services to dual clients.** Whenever professional counseling services are provided to dual clients, the provider shall initially inform each client of the provider's responsibility to treat any information gained in the course of rendering the services as private information, including any limitations to each client's right to privacy.

**Subp. 4. Obtaining collateral information.** Prior to obtaining collateral information about a client from other individuals, the provider shall inform the other individuals that the information obtained may become part of the client's records and may therefore be accessed or released by the client, unless prohibited by law. For purposes of this subpart, "other individual" means any individual, except for credentialed health care providers acting in their professional capacities, who participates adjunctively in the provision of services to a client. Examples of other individuals include, but are not limited to, a family member, friend, coworker, day care worker, guardian ad litem, foster parent, or school personnel.

**Subp. 5. Minor clients.** At the beginning of a professional relationship, the provider shall inform a minor client that the law imposes limitations on the right of privacy of the minor with respect to the minor's communications with the provider. This requirement is waived when the minor cannot reasonably be expected to understand the privacy statement.

**Subp. 6. Limited access to client records.** The provider shall limit access to client records. The provider shall make reasonable efforts to inform or cause to be informed individuals associated with the provider's agency or facility, such as a staff member, student, volunteer, or community aide, that access to client records, regardless of their format, shall be limited only to the provider with whom the client has a professional relationship, an individual associated with the agency or facility whose duties require access, or individuals authorized to have access by the written informed consent of the client.

**Subp. 7. Billing statements for services.** The provider shall comply with the privacy wishes of clients regarding to whom and where statements for services are to be sent.

**Subp. 8. Case reports.** Case reports or other clinical materials used in teaching, presentations, professional meetings, or publications shall be reasonably disguised to prevent identification of the client.

**Subp. 9. Observation and recording.** Diagnostic interviews or therapeutic sessions with a client may be observed or electronically recorded only with written informed consent.

**Subp. 10. Continued privacy of client information.** The provider shall continue to maintain the privacy of client information, including the records of a client, after the professional relationship has ceased between the provider and the client.

**Subp. 11. Court-ordered or other mandated disclosures.** The proper disclosure of private information upon a court order or to conform with state or federal law, rule, or regulation shall not be considered a violation of parts 2150.7500 to 2150.7610.

**Subp. 12. Abuse or neglect of minors or vulnerable adults.** In the course of professional practice, the provider shall not violate any law concerning the reporting of abuse or neglect of minors or vulnerable adults.

**Subp. 13. Initial contacts.** When the provider is initially contacted by an individual regarding professional counseling services to a potential client, the provider or another individual designated by the provider may, with oral consent from the potential client, contact third parties to determine payment or benefits information, arrange for precertification of services when required by the individual's health plan, or acknowledge a referral from another health care professional.

## **2150.7520 ACCESSING AND RELEASING PRIVATE INFORMATION.**

**Subpart 1. Right to access and release private information.** A client has the right to access and release private information maintained by the provider, including client records as provided in *Minnesota Statutes*, section 144.335, relating to the provider's counseling services to that client, except as otherwise provided by law or court order.

**Subp. 2. Release of private information.** When a client initiates the release of private information, the request must be in writing and signed by the client. Informed consent is not required. When the request involves client records, all pertinent information shall be released in compliance with *Minnesota Statutes*, section 144.335. However, if the provider initiates the release of private information, written authorization for release of information must be obtained from the client and must minimally include:

- A. the name of the client;
- B. the name of the individual or entity providing the information;
- C. the name of the individual or entity to which release is to be made;
- D. the types of information to be released, such as progress notes, diagnoses, assessment data, or other specific information;

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# Proposed Rules

E. the purpose of the release, such as whether the release is to coordinate professional care with another provider, to obtain insurance payments for services, or for other specified purposes;

F. the time period covered by the consent;

G. a statement that the consent is valid for one year, except as otherwise allowed by statute, or for a lesser period that is specified in the consent;

H. a declaration that the individual signing the statement has been told of and understands the nature and purpose of the authorized release;

I. a statement that the consent may be rescinded, except to the extent that the consent has already been acted upon or that the right to rescind consent has been waived separately in writing;

J. the signature of the client or the client's legally authorized representative, whose relationship to the client must be stated; and

K. the date on which the consent is signed.

**Subp. 3. Dual client records.** Whenever counseling services are provided to dual clients, each client has the right to access or release only that information in the records that the client has provided directly or has authorized other sources to provide, unless otherwise directed by law or court order. Upon a request by one client to access or release dual client records, that information in the records that has not been provided directly or by authorization of the requesting client must be redacted unless written authorization to disclose this information has been obtained from the other client.

**Subp. 4. Board investigations.** The provider shall release to the board and its agents private information that the board and its agents consider to be germane to the investigation of all matters pending before the board that relate to its lawful regulation activities.

## **2150.7525 INFORMED CONSENT.**

**Subpart 1. Obtaining informed consent for services.** The provider shall obtain informed consent for services to a client. Except as provided in subpart 2, the informed consent may be oral or written and must minimally include the following:

A. the goals, purpose, and procedures of the proposed service;

B. a discussion of factors that may impact the duration of the service;

C. the applicable fee schedule;

D. the limits to the client's privacy;

E. the provider's responsibilities if the client decides to terminate the service;

F. the significant risks and benefits of the service, including whether the service may affect the client's legal or other interests;

G. if the proposed service, method, or procedure is of an experimental, emerging, or innovative nature, the provider shall advise the client in accordance with part 2150.7510, subpart 3; and

H. where applicable, information that the provider is developing a competence in the proposed service, method, or procedure and alternatives to the service, if any.

**Subp. 2. Written informed consent.** Written informed consent is required for forensic services, services in which the provider is developing competence, or for services of an experimental, emerging, or innovating nature.

**Subp. 3. Updating informed consent.** If the nature or purpose of a service changes substantially, the provider must reobtain informed consent accordingly.

**Subp. 4. Emergency or crisis services.** When emergency or crisis services are provided, the provider need not obtain informed consent. If services continue after the emergency or crisis has abated, informed consent must then be obtained.

## **2150.7530 TERMINATION OF SERVICES.**

**Subpart 1. Right to terminate services.** Either the provider or client may terminate a professional relationship unless prohibited by law or court order.

**Subp. 2. Mandatory termination of services.** The provider shall promptly terminate services to a client whenever:

A. the provider's objectivity or effectiveness is impaired, unless a resolution can be achieved as permitted in part 2150.7540; or

B. the client is unlikely to benefit from continued professional services by the provider, is being harmed by further services, or the services are not needed.

**Subp. 3. Notification of termination.** Whenever the provider initiates a termination of professional services, the provider shall inform the client either orally or in writing. This requirement shall not apply when the termination is due to the successful completion of a predefined service such as an assessment or time-limited therapy, or if the client terminates the professional relationship.

**Subp. 4. Recommendation upon termination.** Upon the termination of counseling services, the provider shall:

A. offer to make a recommendation to the client for appropriate mental health services whenever the provider believes they are needed by the client; or

# Proposed Rules

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B. provide such a recommendation upon the request of the client.

Subp. 5. **Exception to required recommendation.** The requirements of subpart 4 do not apply when an assessment of an individual for a third party is conducted in which a recommendation for mental health services is not part of the requested service.

Subp. 6. **Absence from practice.** Nothing in this part requires the provider to terminate a client due to an absence from practice that is the result of a period of illness or injury that does not affect the provider's ability to practice with reasonable skill and safety, as long as arrangements have been made for temporary counseling services that may be needed by the client during the provider's absence.

## **2150.7535 RECORD KEEPING.**

Subpart 1. **Record keeping requirements.** Providers shall maintain accurate and legible records of their services for each client. Records must minimally contain:

A. an accurate chronological listing of all contacts with the client;

B. documentation of services, including, where applicable:

(1) assessment methods, data, and reports;

(2) an initial treatment plan and any subsequent revisions;

(3) the name of the individual providing the services;

(4) case notes for each date of service, including any interventions;

(5) consultations with collateral sources;

(6) diagnoses or problem description;

(7) documentation that informed consent for services was obtained, including written informed consent documents, where required;

and

(8) the name and credentials of the individual who is professionally responsible for the services provided;

C. copies of all correspondence relevant to the client;

D. a client personal data sheet;

E. copies of all client authorizations for release of information and any other documents pertaining to the client; and

F. an accurate chronological listing of all fees charged, if any, to the client or a third-party payer.

Subp. 2. **Duplicate records.** Although it is the responsibility of providers to document the information required in subpart 1, they need not maintain client records that duplicate those maintained by the agency, clinic, or other facility at which they provide services.

Subp. 3. **Records retention.** The provider shall retain a client's records for a minimum of seven years after the date of the provider's last professional service to the client, except as otherwise provided by law. If the client is a minor, the records retention period does not begin until the client reaches the age of 18, except as otherwise provided by law.

## **2150.7540 IMPAIRED OBJECTIVITY OR EFFECTIVENESS.**

Subpart 1. **Situations involving impaired objectivity or effectiveness.** A professional counselor must not provide counseling services to a client or potential client when the professional counselor's objectivity or effectiveness is impaired. The situations in items A to F are deemed to involve impaired objectivity or effectiveness and are prohibited as specified.

A. The provider shall not provide counseling services to a client if doing so would create a multiple relationship. If an unforeseen multiple relationship arises after services have been initiated, the provider shall promptly terminate the professional relationship.

B. The provider shall not provide to a client psychotherapy or assessment services and, concurrently, either supervision or teaching. If an unforeseen situation arises in which both types of services are required or requested by the client or a third party, the provider shall decline to provide one or both of the services.

C. The provider shall not provide concurrently to a client two or more types of counseling services in which a fundamental conflict arises. If the conflict cannot be resolved in the manner required in subpart 2, the provider shall decline to provide one or more of the services that give rise to the conflict.

D. The provider shall not provide psychotherapy services to dual clients whose psychotherapy goals are fundamentally irreconcilable. If an unforeseen situation of this type should arise after services have been initiated, the provider shall promptly terminate services to one or both clients.

E. The provider shall not provide counseling services to a client when the provider is biased for or against the client for any reason that interferes with the provider's impartial judgment, including where the client is a member of a class of individuals that is legally protected from discrimination. However, services may be provided if the provider is resolving the impairment in the manner required in subpart 2.

F. The provider shall not provide counseling services to a client when there is a fundamental divergence or conflict of service goals, interests, values, or attitudes between the client and the provider that adversely affects the professional relationship. However, services may be provided if the provider is resolving the impairment in the manner required in subpart 2.

Subp. 2. **Resolution of impaired objectivity or effectiveness.** When an impairment occurs that is listed in subpart 1, item C, E, or F, the provider may provide services only if the provider actively pursues a resolution of the impairment and is able to do so in a manner that

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# Proposed Rules

results in minimal adverse effects on the client or potential client. If the provider attempts to resolve the impairment, it must be by means of relevant professional education, training, continuing education, consultation, psychotherapy, intervention, supervision, or discussion with the client or potential client, or an appropriate combination thereof.

## **2150.7545 PROVIDER IMPAIRMENT.**

The provider shall not provide counseling services to clients when the provider is unable to provide such services with reasonable skill and safety as a result of a physical or mental illness or condition, including, but not limited to, substance abuse or dependence. During the period in which the provider is unable to practice with reasonable skill and safety, the provider shall either promptly terminate the professional relationship with all clients or shall make arrangements for other mental health providers to provide temporary services that are needed by clients during the provider's absence.

## **2150.7550 CLIENT WELFARE.**

**Subpart 1. Providing explanation of procedures.** A client has the right to have and a counselor has the responsibility to provide, on request, a nontechnical explanation of the nature and purpose of the counseling procedures to be used and the results of tests administered to the client. The counselor shall establish procedures to be followed if the explanation is to be provided by another individual under the direction of the counselor.

**Subp. 2. Clients' bill of rights.** The provider shall display prominently on the premises of the professional practice or make available as a handout the bill of rights of clients as required by *Minnesota Statutes*, section 144.652, that includes a statement that consumers of professional counseling services have the right to:

- A. expect that the provider has met the minimal qualifications of training and experience required by state law;
- B. examine public records maintained by the Board of Behavioral Health and Therapy that contain the credentials of the provider;
- C. obtain a copy of the Rules of Conduct from the *State Register* and Public Documents Division, Department of Administration, 117 University Avenue, St. Paul, MN 55155;
- D. report complaints to the Board of Behavioral Health and Therapy;
- E. be informed of the cost of professional services before receiving the services;
- F. privacy as defined and limited by rule and law;
- G. be free from being the object of unlawful discrimination while receiving counseling services;
- H. have access to their records as provided in part 2150.7520, subpart 1, and *Minnesota Statutes*, section 144.335, subdivision 2, except as otherwise provided by law;
- I. be free from exploitation for the benefit or advantage of the provider;
- J. terminate services at any time, except as otherwise provided by law or court order;
- K. know the intended recipients of assessment results;
- L. withdraw consent to release assessment results, unless this right is prohibited by law or court order or is waived by prior written agreement;
- M. a nontechnical description of assessment procedures; and
- N. a nontechnical explanation and interpretation of assessment results, unless this right is prohibited by law or court order or this right was waived by prior written agreement.

**Subp. 3. Stereotyping.** The provider shall consider the client as an individual and shall not impose on the client any stereotypes of behavior, values, or roles related to human diversity.

**Subp. 4. Misusing client relationship.** The provider shall not misuse the relationship with a client due to a relationship with another individual or entity.

**Subp. 5. Exploitation of client.** The provider shall not exploit in any manner the professional relationship with a client for the provider's emotional, financial, sexual, or personal advantage or benefit. This prohibition is extended indefinitely to former clients who are vulnerable or dependent on the provider.

**Subp. 6. Sexual behavior with client.** A provider shall not engage in any sexual behavior with a client including:

- A. sexual contact with the client, as defined in *Minnesota Statutes*, section 148A.01, subdivision 7; or
- B. any physical, verbal, written, interactive, or electronic communication, conduct, or act that may be reasonably interpreted to be sexually seductive, demeaning, or harassing to the client.

**Subp. 7. Sexual behavior with a former client.** Providers shall not engage in any sexual behavior as described in subpart 6 within the two-year period following the date of the last counseling service to a former client. This prohibition applies whether or not the provider has formally terminated the professional relationship. This prohibition is extended indefinitely regarding a former client who is vulnerable or dependent on the provider.

**Subp. 8. Preferences and options for treatment.** A provider shall disclose to the client preferences of the provider for choice of treatment or outcome and shall present other options for the consideration or choice of the client.

# Proposed Rules

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Subp. 9. Referrals on request. A provider shall make a prompt and appropriate referral of the client to another professional when requested to do so by the client.

Subp. 10. Coordinating services with other professionals. A provider shall ask a client whether the client has had or continues to have a professional relationship with another mental health professional. If it is determined that the client had or has a professional relationship with another mental health professional, the provider shall, to the extent possible and consistent with the wishes and best interests of the client, coordinate services for that client with the other mental health professional.

## **2150.7555 WELFARE OF STUDENTS, SUPERVISEES, AND RESEARCH SUBJECTS.**

Subpart 1. General. Due to the evaluative, supervisory, or other authority that providers who teach, evaluate, supervise, or conduct research have over their students, supervisees, or research subjects, they shall protect the welfare of these individuals.

Subp. 2. Student, supervisee, and research subject protections. To protect the welfare of their students, supervisees, or research subjects, providers shall not:

A. impose any stereotypes of behavior, values, or roles related to race, ethnicity, national origin, religious affiliation, language, age, gender, physical disabilities, mental capabilities, sexual orientation or identity, marital status, or socioeconomic status;

B. exploit or misuse in any manner the professional relationship for the emotional, financial, sexual, or personal advantage or benefit of the provider or another individual or entity;

C. engage in any sexual behavior with a current student, supervisee, or research subject, including sexual contact, as defined in *Minnesota Statutes*, section 148A.01, subdivision 7, or any physical, verbal, written, interactive, or electronic communication, conduct, or act that may be reasonably interpreted to be sexually seductive, demeaning, or harassing. Nothing in this part shall prohibit a provider from engaging in teaching or research with an individual with whom the provider has a preexisting and ongoing sexual relationship;

D. engage in any behavior likely to be deceptive or fraudulent;

E. disclose evaluative information except for legitimate professional or scientific purposes; or

F. engage in any other unprofessional conduct.

## **2150.7560 MEDICAL AND OTHER HEALTH CARE CONSIDERATIONS.**

Subpart 1. Coordinating services with other health care professionals. Upon initiating counseling services, the provider shall inquire whether the client has a professional relationship with another health care professional. If it is determined that the client has such a professional relationship that is relevant to the provider's services to the client, the provider shall, to the extent possible and consistent with the wishes and best interests of the client, coordinate services for that client with the other health care professional. This requirement does not apply if brief psychotherapy or crisis intervention services are provided.

Subp. 2. Reviewing previous health care information. If the provider determines that the client has had a relationship that is relevant to the provider's services to the client, the provider shall, to the extent possible and consistent with the wishes and best interests of the client, seek to review this information.

Subp. 3. Relevant medical conditions. If the provider becomes aware that a client's psychological condition or diagnosis may have a medical etiology or consequence, the provider shall, within the boundaries of the provider's competence and consistent with the wishes and best interests of the client, discuss this with the client and offer to assist with identifying possible medical resources for the client to consider.

Subp. 4. Medications.

A. Within their competence, providers may discuss prescription or nonprescription medications and their effects with a client or the client's physician or prescribing health care provider, or in a report.

B. Providers shall make clear in medication discussions with a client or in a report that the ultimate decision whether to prescribe, alter, or discontinue a medication lies solely with a physician or other prescribing health care provider.

C. Providers shall not recommend to a client or in a report specific medications by trade or generic name or dosage, or recommend the discontinuation of medications.

## **2150.7565 ASSESSMENTS, TESTS, REPORTS.**

Subpart 1. Basis for assessments. When providers conduct assessments, they shall meet the requirements in items A to C.

A. They shall base their assessments on records, information, observations, and techniques sufficient to substantiate their findings.

B. Except as permitted in item C, they shall render opinions regarding individuals only after they have conducted an examination of the individual adequate to support their statements or conclusions, unless such an examination is not practical despite reasonable efforts.

C. They may limit their assessments to reviewing records or providing testing services when an individual examination is not warranted or necessary for the opinion requested.

Subp. 2. Administration and interpretation of tests. Providers shall use tests as described in items A to E. A. Standardized tests shall be used preferentially over nonstandardized tests.

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## Proposed Rules

B. All tests must be administered and responses must be recorded, scored, and interpreted based on practice or scientific foundations.

C. If a test is used in a nonstandard manner, the limitations of the test and the reasons for its nonstandard use must be clearly stated in the report.

D. A test's reliability, validity, and normative data must be taken into account in its selection, use, and interpretation.

E. The reliability and validity of test statements and interpretations in reports are the responsibility of the provider, including when automated testing services are used.

**Subp. 3. Reports.** The provision of a written or oral report, including testimony of a provider as an expert witness and letters to third parties concerning the psychological or emotional health or state of a client, must be based on information and techniques sufficient to substantiate their findings. Providers shall be fair and accurate and shall guard against making unsubstantiated statements or providing unsubstantiated opinions, interpretations, or recommendations in their reports. The report must include:

A. a description of all assessments, evaluations, or other procedures, including materials reviewed, upon which the provider's conclusions are based;

B. any reservations or qualifications concerning the validity or reliability of the opinions and conclusions formulated and recommendations made, taking into account the conditions under which the procedures were carried out, including any nonstandard use of a test, the limitations of scientific procedures and descriptions, base rate and baseline considerations, and the impossibility of absolute predictions;

C. a statement concerning any discrepancy, disagreement, or inconsistent or conflicting information regarding the circumstances of the case that may have a bearing on the provider's conclusions;

D. a statement of the nature of and reasons for any use of a test that differs from the purposes, populations, or referral questions for which it has been designed or validated, or that is administered, recorded, scored, or interpreted in other than a standard and objective manner; and

E. a statement indicating whenever any test interpretations or report conclusions are not based on direct contact between the provider and the client.

**Subp. 4. Private information.** A test result or interpretation regarding an individual is private information.

### **2150.7570 PUBLIC STATEMENTS.**

**Subpart 1. Prohibition against false or misleading information.** Public statements by providers must not include false or misleading information. Providers shall not solicit or use testimonials by quotation or implication from current clients or former clients who are vulnerable to undue influence. The provider shall make reasonable efforts to ensure that public statements by others on behalf of the provider are truthful and shall make reasonable remedial efforts to bring a public statement into compliance with parts 2150.7500 to 2150.7610 when the provider becomes aware of a violation.

**Subp. 2. Misrepresentation.** The provider shall not misrepresent directly or by implication professional qualifications including education, training, experience, competence, credentials, or areas of specialization. The provider shall not misrepresent, directly or by implication, professional affiliations or the purposes and characteristics of institutions and organizations with which the provider is professionally associated.

**Subp. 3. Use of specialty board designations.** Providers may represent themselves as having an area of specialization from a specialty board, such as a designation as diplomate or fellow, if the specialty board used at minimum, the following criteria to award the designation:

A. specified educational requirements defined by the specialty board;

B. specified experience requirements defined by the specialty board;

C. a work product evaluated by other specialty board members; and

D. a face-to-face examination by a committee of specialty board members or a comprehensive written examination in the area of specialization.

### **2150.7575 PRESENTATION TO PUBLIC.**

**Subpart 1. Requirements for professional identification.** All licensees, when representing themselves in activities relating to the practice of professional counseling, including in written materials or advertising, shall identify the academic degree upon which their licensure is based, as well as their licensure. Individuals licensed on the basis of the equivalent of a master's degree in a doctoral program shall similarly use the designation "M. Eq." to identify the educational status on which their licensure is based, as well as their licensure.

**Subp. 2. Disclosure of education.** At the initial meeting, a licensee shall display or make available to each new client accurate information about the qualifications and competencies of the licensee, including whether the licensee is currently completing the postlicensure supervised practice requirement.

**Subp. 3. Requirements for representations to public.**

A. Unless licensed under *Minnesota Statutes*, sections 148B.50 to 148B.593, persons shall not represent themselves or permit themselves to be represented to the public by:

(1) using any title or description of services, incorporating the words "licensed professional counselor" or "professional counselor"

# Proposed Rules

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or otherwise holding themselves out to the public by any title or description stating or implying that they are licensed to engage in the practice of professional counseling; or

(2) representing that the person has expert qualifications in an area of professional counseling.

B. Individuals trained in professional counseling who are employed by an educational institution recognized by a regional accrediting organization, by a federal, state, county, or local government institution, by agencies, or by research facilities, may represent themselves by the title designated by that organization provided that the title does not indicate that the individual is licensed by the board.

C. An individual trained in professional counseling from an institution described in item B may offer lecture services and is exempt from the provisions of this part.

D. A person who is participating in a supervised field experience as part of a degree program or for purposes of licensure by the board may be designated as a "counselor intern."

## Subp. 4. Persons or techniques not regulated by board.

A. Nothing in *Minnesota Statutes*, sections 148B.50 to 148B.593, may be construed to limit the occupational pursuits consistent with their training and codes of ethics of professionals such as licensed physicians, registered nurses, licensed practical nurses, licensed psychologists, probation officers, attorneys, social workers, marriage and family therapists, qualified rehabilitation consultants, natural family planning practitioners certified by the American Academy of Natural Family Planning, and registered occupational therapists or certified occupational therapist assistants. These persons must not, however, use a title incorporating the words "licensed professional counselor" or otherwise hold themselves out to the public by any title or description stating or implying that they are licensed to engage in the practice of professional counseling unless they are licensed under *Minnesota Statutes*, sections 148B.50 to 148B.593.

B. Use of professional counseling techniques by business and industrial organizations for their own personnel purposes or by employment agencies or state vocational rehabilitation agencies for the evaluation of their own clients prior to recommendation for employment is also specifically allowed. However, no representative of an industrial or business firm or corporation may sell, offer, or provide any professional counseling services as defined in *Minnesota Statutes*, section 148B.50, unless the services are performed or supervised by individuals licensed under *Minnesota Statutes*, sections 148B.50 to 148B.593.

Subp. 5. **Other professions not authorized.** Nothing in *Minnesota Statutes*, sections 148B.50 to 148B.593, may be construed to authorize a person licensed under *Minnesota Statutes*, sections 148B.50 to 148B.593, to engage in the practice of any profession regulated under Minnesota law unless the person is duly licensed or registered in that profession.

## 2150.7580 FEES AND STATEMENTS.

Subpart 1. **Disclosure of fees.** The provider shall disclose the fees for professional services to a client before providing the services.

Subp. 2. **Itemized fee statement.** The provider shall itemize fees for all services for which the client or a third party is billed and make the itemized statement available to the client. The statement shall identify minimally the date on which the service was provided, the nature of the service, the name of the individual providing the service, and the name of the individual who is professionally responsible for the service.

Subp. 3. **Representation of billed services.** The provider shall not directly or by implication misrepresent to the client or to a third party billed for services the nature of the services or the extent to which the provider has provided the services.

Subp. 4. **Claiming fees.** The provider shall not claim a fee for counseling services unless the provider is either the direct provider of the services or the individual who is clinically responsible for the provision of the services and under whose supervision the services were provided.

Subp. 5. **No remuneration for referrals.** No commission, rebate, or other form of remuneration may be given or received by a provider for the referral of clients for counseling services.

## 2150.7585 AIDING AND ABETTING UNLICENSED PRACTICE.

A provider shall not aid or abet an unlicensed individual to engage in the practice of professional counseling. However, a provider who supervises a student as part of an internship, practicum, or other supervised field experience is not in violation of this part if the supervision is conducted according to part 2150.5000 and *Minnesota Statutes*, sections 148B.50 to 148B.593. Additionally, properly qualified individuals who administer and score testing instruments under the direction of a provider who maintains responsibility for the service are not considered to be in violation of this part. The provider assumes responsibility for adequate training, experience, and oversight to assure proper qualifications to administer and score the instruments.

## 2150.7590 VIOLATION OF LAW.

A provider shall not violate any law in which the facts giving rise to the violation involve the practice of professional counseling as defined in *Minnesota Statutes*, sections 148B.50 to 148B.593. In any board proceeding alleging such a violation of this part, the proof of a conviction of a crime constitutes proof of the underlying factual elements necessarily underlying that conviction.

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# Proposed Rules

## **2150.7595 DECEPTION OR FRAUD.**

A provider shall not engage in any conduct likely to deceive or defraud the public or the board.

## **2150.7600 UNPROFESSIONAL CONDUCT.**

A provider shall not engage in any unprofessional conduct. Unprofessional conduct is any conduct violating parts 2150.7500 to 2150.7610, *Minnesota Statutes*, sections 148B.50 to 148B.593, or any conduct that fails to conform to the minimum standards of acceptable and prevailing practice that have become established by consensus of the expert opinion of professional counselors as reasonably necessary for the protection of the public interest.

## **2150.7605 COMPLAINTS TO BOARD.**

**Subpart 1. Mandatory reporting requirements.** A provider shall file a complaint with the board when the provider has reason to believe that another provider:

A. is unable to practice with reasonable skill and safety as a result of a physical or mental illness or condition, including, but not limited to, substance abuse or dependence, except that this mandated reporting requirement is deemed fulfilled by a report made to the Health Professionals Services Program (HPSP) as provided by *Minnesota Statutes*, section 214.33, subdivision 1;

B. is engaging in or has engaged in sexual behavior with a client or former client in violation of part 2150.7550, subparts 5 and 6. This subpart does not apply when the information is obtained in the course of treating the other provider for the sexual behavior;

C. has failed to report abuse or neglect of children or vulnerable adults in violation of *Minnesota Statutes*, section 626.556 or 626.557; or

D. has employed fraud or deception in obtaining or renewing a professional counseling license.

**Subp. 2. Optional reporting requirements.** A provider who has reason to believe that the conduct of another provider appears to be in violation of parts 2150.7500 to 2150.7610 or *Minnesota Statutes*, sections 148B.50 to 148B.593, other than conduct listed in subpart 1 may file a complaint with the board.

**Subp. 3. Client complaints to board.** A provider shall, upon request, provide information regarding the procedure for filing a complaint with the board and shall, upon request, assist with filing a complaint. A provider shall not attempt to dissuade a client from filing a complaint with the board, or require that the client waive the right to file a complaint with the board as a condition for providing services.

## **2150.7610 WAIVERS AND VARIANCES.**

**Subpart 1. Application.** A licensee or applicant for licensure may petition the board for a waiver or variance of any rule except for any part of a rule which incorporates a statutory requirement. The petition shall be on a form prescribed by the board, and shall be accompanied by the applicable fee. The waiver or variance shall be granted if:

A. adherence to the rule would impose an undue burden on the petitioner;

B. the granting of a waiver or variance will not adversely affect the public welfare; and

C. in the case of a variance, the rationale for the rule in question can be met by alternative practices or measures specified by the petitioner.

**Subp. 2. Renewal, reporting, and revocation.** A waiver or variance shall be renewed upon reapplication according to the procedure described in subpart 1 if the circumstances justifying its granting continue to exist. Any petitioner who is granted a waiver or variance shall immediately notify the board in writing of any material change in the circumstances that justify its granting. A waiver or variance shall be revoked if a material change in the circumstances that justify its granting occurs or, in the case of a variance, if the petitioner has not complied with the alternative practices or measures specified in the petition.

**Subp. 3. Burden of proof.** The burden of proof is upon the petitioner to demonstrate to the board that the requirements in subpart 1 have been met.

**Subp. 4. Statement of reasons.** The minutes of any meeting at which a waiver or variance is granted, denied, renewed, or revoked must include the reason for the action.

# Proposed Rules

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## Minnesota Department of Health

### Division of Infectious Disease Epidemiology, Prevention and Control

#### Proposed Permanent Rules Relating to Communicable Disease Reporting

#### DUAL NOTICE: Notice of Intent to Adopt Rules Without a Public Hearing Unless 25 or More Persons Request a Hearing, and Notice of Hearing If 25 or More Requests for Hearing Are Received

#### Proposed Amendments to Rules Governing Communicable Disease Reporting, *Minnesota Rules*, Chapter 4605

**Introduction.** The Department of Health intends to adopt rules without a public hearing following the procedures set forth in the rules of the Office of Administrative Hearings, *Minnesota Rules*, parts 1400.2300 to 1400.2310, and the Administrative Procedure Act, *Minnesota Statutes*, sections 14.22 to 14.28. If, however, 25 or more persons submit a written request for a hearing on the rules by 4:30 p.m. on February 2, 2005, a public hearing will be held in the Chesley Room at the Minnesota Department of Health, 717 Delaware St. SE, Minneapolis, Minnesota 55414, starting at 9:00 a.m. on Monday, February 14, 2005. To find out whether the rules will be adopted without a hearing or if the hearing will be held, you should contact the agency contact person after February 2, 2005 and before February 11, 2005.

**Agency Contact Person.** Comments or questions on the rules and written requests for a public hearing on the rules must be submitted to the agency contact person. The agency contact person is: Patricia Segal Freeman at the Minnesota Department of Health, P.O. Box 9441, Minneapolis, MN 55440-9441, **Phone:** (612) 676-5414, 1-877-676-5414, **Fax:** (612) 676-5689 and [commdisrule@health.state.mn.us](mailto:commdisrule@health.state.mn.us). **TTY** users may call the Department of Health at (651) 215-8980.

**Subject of Rules and Statutory Authority.** The proposed rules govern communicable disease reporting. The statutory authority to adopt the rules is *Minnesota Statutes*, section 144.12, subd. 1 and *Minnesota Statutes*, section 144.05 subd.1. A copy of the proposed rules is published in the *State Register* and on MDH's website at <http://www.health.state.mn.us/divs/idepc/dtopics/reportable/#rule>. A free copy of the rules is also available upon request from the agency contact.

**Comments.** You have until 4:30 p.m. on Wednesday, February 2, 2005, to submit written comments in support of or in opposition to the proposed rules or any part or subpart of the rules. Your comment must be in writing and received by the agency contact person by the due date. Comment is encouraged. Your comments should identify the portion of the proposed rules addressed, the reason for the comment, and any change proposed. You are encouraged to propose any change desired. Any comments that you would like to make on the legality of the proposed rules must also be made during this comment period.

**Request for a Hearing.** In addition to submitting comments, you may also request that a hearing be held on the rules. Your request for a public hearing must be in writing and must be received by the agency contact person by 4:30 p.m. on Wednesday, February 2, 2005. Your written request for a public hearing must include your name and address. You must identify the portion of the proposed rules to which you object or state that you oppose the entire set of rules. Any request that does not comply with these requirements is not valid and cannot be counted by the agency when determining whether a public hearing must be held. You are also encouraged to state the reason for the request and any changes you want made to the proposed rules.

**Withdrawal of Requests.** If 25 or more persons submit a valid written request for a hearing, a public hearing will be held unless a sufficient number withdraw their requests in writing. If enough requests for hearing are withdrawn to reduce the number below 25, the agency must give written notice of this to all persons who requested a hearing, explain the actions the agency took to effect the withdrawal, and ask for written comments on this action. If a public hearing is required, the agency will follow the procedures in *Minnesota Statutes*, sections 14.131 to 14.20.

**Alternative Format/Accommodation.** Upon request, this Notice can be made available in an alternative format, such as large print, Braille, or cassette tape. To make such a request or if you need an accommodation to make this hearing accessible, please contact the agency contact person at the address or telephone number listed above.

**Modifications.** The proposed rules may be modified, either as a result of public comment or as a result of the rule hearing process. Modifications must be supported by data and views submitted to the agency or presented at the hearing and the adopted rules may not be substantially different than these proposed rules, unless the procedure under *Minnesota Rules*, part 1400.2110, has been followed. If the proposed rules affect you in any way, you are encouraged to participate in the rulemaking process.

**Cancellation of Hearing.** The hearing scheduled for February 14, 2005, will be canceled if the agency does not receive requests from 25 or more persons that a hearing be held on the rules. If you requested a public hearing, the agency will notify you before the scheduled hearing whether or not the hearing will be held. You may also call the agency contact person at (612) 676-5414 after February 2, 2005 to find out whether the hearing will be held.

**Notice of Hearing.** If 25 or more persons submit valid written requests for a public hearing on the rules, a hearing will be held following the procedures in *Minnesota Statutes*, sections 14.131 to 14.20. The hearing will be held on the date and at the time and place listed above. The hearing will continue until all interested persons have been heard. Administrative Law Judge Barbara Neilson is assigned to conduct the hearing. Judge Neilson can be reached at the Office of Administrative Hearings, 100 Washington Square, Suite 1700, Minneapolis, Minnesota 55401-2138, **telephone** (612) 341-7604, and **FAX** (612) 349-2665.

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# Proposed Rules

**Hearing Procedure.** If a hearing is held, you and all interested or affected persons, including representatives of associations or other interested groups, will have an opportunity to participate. You may present your views either orally at the hearing or in writing at any time before the close of the hearing record. All evidence presented should relate to the proposed rules. You may also submit written material to the Administrative Law Judge to be recorded in the hearing record for five working days after the public hearing ends. This five-day comment period may be extended for a longer period not to exceed 20 calendar days if ordered by the Administrative Law Judge at the hearing. Following the comment period, there is a five-working-day rebuttal period during which the agency and any interested person may respond in writing to any new information submitted. No additional evidence may be submitted during the five-day rebuttal period. All comments and responses submitted to the Administrative Law Judge must be received at the Office of Administrative Hearings no later than 4:30 p.m. on the due date. All comments or responses received will be available for review at the Office of Administrative Hearings. This rule hearing procedure is governed by *Minnesota Rules*, parts 1400.2000 to 1400.2240, and *Minnesota Statutes*, sections 14.131 to 14.20. Questions about procedure may be directed to the Administrative Law Judge.

The agency requests that any person submitting written views or data to the Administrative Law Judge prior to the hearing or during the comment or rebuttal period **also submit a copy of the written views or data to the agency contact person at the address stated above.**

**Statement of Need and Reasonableness.** A statement of need and reasonableness is now available from the agency contact person. This statement contains a summary of the justification for the proposed rules, including a description of who will be affected by the proposed rules and an estimate of the probable cost of the proposed rules. The statement may also be reviewed and copies obtained at the cost of reproduction from the agency.

**Lobbyist Registration.** *Minnesota Statutes*, chapter 10A, requires each lobbyist to register with the State Campaign Finance and Public Disclosure Board. Questions regarding this requirement may be directed to the Campaign Finance and Public Disclosure Board at: Suite 190, Centennial Building, 658 Cedar Street, St. Paul, Minnesota 55155, **telephone** (651) 296-5148 or 1-800-657-3889.

**Adoption Procedure if No Hearing.** If no hearing is required, the agency may adopt the rules after the end of the comment period. The rules and supporting documents will then be submitted to the Office of Administrative Hearings for review for legality. You may ask to be notified of the date the rules are submitted to the office. If you want to be so notified, or want to receive a copy of the adopted rules, or want to register with the agency to receive notice of future rule proceedings, submit your request to the agency contact person listed above.

**Adoption Procedure After a Hearing.** If a hearing is held, after the close of the hearing record, the Administrative Law Judge will issue a report on the proposed rules. You may ask to be notified of the date when the Administrative Law Judge's report will become available, and can make this request at the hearing or in writing to the Administrative Law Judge. You may also ask to be notified of the date on which the agency adopts the rules and the rules are filed with the Secretary of State, and can make this request at the hearing or in writing to the agency contact person stated above.

**Order.** I order that the rulemaking hearing be held at the date, time, and location listed above.

Dianne M. Mandernach  
Commissioner

## 4605.7000 DEFINITIONS.

Subpart 1. **Case.** "Case" means a person or deceased person infected with a particular infectious agent or having a particular disease diagnosed by a physician.

Subp. 2. **Carrier.** "Carrier" means a person or deceased person identified as harboring a specific infectious agent and who serves as a potential source of infection.

Subp. 3. **Clinical materials.** "Clinical materials" means:

A. a clinical isolate containing the infectious agent for which submission of material is required; or

B. if an isolate is not available, material containing the infectious agent for which submission of material is required, in the following order of preference:

(1) a patient specimen;

(2) nucleic acid; or

(3) other laboratory material.

Subp. 3 4. **Commissioner.** "Commissioner" means the state commissioner of health or authorized officers, employees, or agents of the Minnesota Department of Health.

Subp. 5. **Contact.** "Contact" means a person who may have been exposed to a case, suspected case, or carrier in a manner that could place the person at risk of acquiring the infection based on known or suspected modes of transmission.

Subp. 6. **Critical illness.** "Critical illness" means the condition of a person who is hospitalized in an intensive care unit or who is critically ill in the judgment of a licensed health care provider.

Subp. 4 7. **Infection control practitioner.** "Infection control practitioner" means any person designated by a hospital, nursing home,

# Proposed Rules

medical clinic, or other health care facility as having responsibility for prevention, detection, reporting, and control of infections within the facility.

Subp. 6 ~~8~~. **Isolation.** “Isolation” means the separation, for the period of communicability, of an infected person from others in places and under the condition as to prevent or limit the direct or indirect transmission of the infectious agent to those who are susceptible or to those who may spread the agent to others.

Subp. 6 ~~9~~. **Board of health.** “Board of health” means authorized administrators, officers, agents, or employees of the county, multicounty, or city board of health organized under *Minnesota Statutes*, sections 145A.09 to 145A.14.

Subp. 7 ~~10~~. **Medical laboratory.** “Medical laboratory” means any facility that receives, forwards, or analyzes specimens of original material from the human body, or referred cultures of specimens obtained from the human body, and reports the results to physicians who use the data for purposes of patient care.

Subp. 8 ~~11~~. **Physician.** “Physician” means any person who is licensed by the Minnesota Board of Medical Practice to practice medicine.

Subp. ~~12~~. **Sentinel surveillance.** “Sentinel surveillance” means monitoring a disease or syndrome through reporting of cases, suspected cases, and carriers and submission of clinical materials by selected sites under part 4605.7046.

Subp. 9 ~~13~~. **Suspected case.** “Suspected case” means a person or deceased person having a condition or illness in which the signs and symptoms resemble those of a recognized disease.

Subp. ~~14~~. **Veterinarian.** “Veterinarian” means any person who is licensed by the Minnesota Board of Veterinary Medicine to practice veterinary medicine.

Subp. ~~15~~. **Public health hazard.** “Public health hazard” means the presence of an infectious agent or condition in the environment which endangers the health of a specified population.

## 4605.7020 APPLICABILITY.

This chapter applies to cases, suspected cases, carriers, and deaths from communicable diseases and syndromes, reporting of disease, and disease control.

## 4605.7030 PERSONS REQUIRED TO REPORT DISEASE.

Subpart 1. **Physicians.** When attending a case, suspected case, carrier, or death from any of the diseases in part 4605.7040 or a pregnancy under part 4605.7044, ~~the a~~ physician shall report within one working day to the commissioner according to part 4605.7040 or 4605.7044, unless previously reported, the information ~~outlined~~ specified in part 4605.7090.

Subp. 2. **Health care facilities.** Hospitals, nursing homes, medical clinics, or other health care facilities ~~must shall~~ designate that all individual physicians report as specified in subpart 1; or the health care facility ~~must shall~~ designate an infection control practitioner or other person as responsible to report to the commissioner, within one working day of according to part 4605.7040 or 4605.7044, knowledge of a case, suspected case, carrier, or death from any of the diseases and syndromes in part 4605.7040 or a pregnancy under part 4605.7044, and the information specified in part 4605.7090.

### Subp. 3. Medical laboratories.

A. All medical laboratories ~~must shall~~ provide to the commissioner, within one working day of completion, the results of microbiologic cultures, examinations, immunologic assays for the presence of antigens and antibodies, and any other laboratory tests, which are indicative of the presence of any of the diseases in part 4605.7040 and the information specified in part ~~4605.7040~~ 4605.7090 as is known.

B. ~~The All~~ medical ~~laboratory must~~ laboratories shall forward to the Minnesota Department of Health, Public Health Laboratory all ~~isolates clinical materials~~ specified in ~~part 4605.7040~~ this chapter upon a positive laboratory finding for the disease or condition, or upon request of the commissioner in relation to a case or suspected case reported under this chapter.

C. If a medical laboratory forwards clinical materials out of state for testing, the originating medical laboratory retains the duty to comply with this subpart, either by:

(1) reporting the results and submitting the clinical materials to the commissioner; or

(2) ensuring that the results are reported and materials submitted to the commissioner.

Subp. 4. **Comprehensive reports.** Any institution, facility, or clinic, staffed by physicians and having medical laboratories which are required to report, as in subparts 1, 2, and 3, may, upon written notification of to the commissioner, designate a single person or group of persons to report cases, suspected cases, carriers, deaths, or results of medical laboratory cultures, examinations, and assays for any of the diseases listed in part 4605.7040 or a pregnancy under part 4605.7044 to the commissioner.

Subp. 5. **Veterinarians and veterinary medical laboratories.** The commissioner of health shall, under the following circumstances, request certain reports of clinical diagnosis of disease in animals ~~and~~, reports of laboratory tests on animals, and clinical materials from animals:

A. the disease is common to both animals and humans;

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# Proposed Rules

- B. the disease may be transmitted directly or indirectly to and between humans and animals;
- C. the persons who are afflicted with the disease are likely to suffer complications, disability, or death as a result; and
- D. investigation based upon veterinarian and veterinary medical laboratory reports will assist in the prevention and control of disease among humans.

Subp. 6. **Others.** Unless previously reported, it shall be the duty of every other licensed health care provider who provides care to any patient who has or is suspected of having any of the diseases listed in part 4605.7040 or a pregnancy under part 4605.7044 to report within one working day to the commissioner, according to part 4605.7040 or 4605.7044, as much of the information outlined specified in part 4605.7090 as is known.

Subp. 7. **Out of state testing.** Persons and entities that are required to report under subpart 1, 2, or 6 and that send clinical materials out of state for testing are responsible for ensuring that results are reported and clinical materials are submitted to the commissioner as required under this chapter.

## 4605.7040 DISEASE AND REPORTS; ISOLATE CLINICAL MATERIALS SUBMISSIONS.

Cases, suspected cases, carriers, and deaths due to the following diseases and infectious agents shall be reported. The diseases followed by an asterisk shall be reported immediately by telephone to the commissioner. When submission of clinical materials is required under this part, submissions shall be made to the Minnesota Department of Health, Public Health Laboratory.

- A. Amebiasis (*Entamoeba histolytica*) Diseases reportable immediately by telephone to the commissioner:
  - B. (1) anthrax\* (*Bacillus anthracis*). Submit clinical materials;
  - C. Babesiosis (*Babesia* sp.)
  - D. Blastomycosis (*Blastomyces dermatitidis*)
  - E. (2) botulism\* (*Clostridium botulinum*);
  - F. (3) brucellosis (*Brucella* sp spp.). Submit clinical materials;
- G. Campylobacteriosis (*Campylobacter* sp.) Submit isolates to the Minnesota Department of Health, Public Health Laboratory
- H. Cat Scratch disease (infection caused by *Bartonella* species)
- I. Chancroid\* (*Haemophilus ducreyi*)
- J. *Chlamydia trachomatis* infections
- K. (4) cholera\* (*Vibrio cholerae*). Submit isolates to the Minnesota Department of Health, Public Health Laboratory clinical materials;
- L. Cryptosporidiosis (*Cryptosporidium parvum*)
- M. Dengue virus infection
- N. (5) diphtheria (*Corynebacterium diphtheriae*). Submit isolates to the Minnesota Department of Health, Public Health Laboratory clinical materials;
- O. *Diphyllobothrium latum* infection
- P. Ehrlichiosis (*Ehrlichia* sp.)
- Q. Encephalitis (caused by viral agents)
- R. Enteric *Escherichia coli* infection (*E. coli* 0157:H7, other enterohemorrhagic *E. coli*, enteropathogenic *E. coli*, enteroinvasive *E. coli*) Submit isolates to the Minnesota Department of Health, Public Health Laboratory
- S. Giardiasis (*Giardia lamblia*)
- T. Gonorrhoea (*Neisseria gonorrhoea* infections)
- U. *Haemophilus influenzae* disease (all invasive disease) Submit isolates to the Minnesota Department of Health, Public Health Laboratory
- V. Hantavirus infection
- W. (6) hemolytic uremic syndrome. Submit clinical materials;
- X. Hepatitis (all primary viral types including A, B, C, D, and E)
- Y. Histoplasmosis (*Histoplasma capsulatum*)
- Z. Human Immunodeficiency Virus (HIV) infection, including Acquired Immunodeficiency Syndrome (AIDS)
- AA. Influenza (unusual case incidence or laboratory confirmed cases)
- BB. Kawasaki disease
- CC. Legionellosis (*Legionella* sp.)
- DD. Leprosy (*Mycobacterium leprae*)
- EE. Leptospirosis (*Leptospira interrogans*)
- FF. Listeriosis (*Listeria monocytogenes*) Submit isolates to the Minnesota Department of Health, Public Health Laboratory
- GG. Lyme Disease (*Borellia burgdorferi*)
- HH. Malaria (*Plasmodium* species)

# Proposed Rules

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- H. (7) measles (rubeola)\*. Submit clinical materials;
- JJ. Meningitis (caused by *Haemophilus influenzae*, *Neisseria meningitidis*, or *Streptococcus pneumoniae*, viral agents) Submit bacterial isolates to the Minnesota Department of Health, Public Health Laboratory
- KK. Meningococemia (8) meningococcal disease (*Neisseria meningitidis meningitidis*) (all invasive disease). Submit isolates to the Minnesota Department of Health, Public Health Laboratory clinical materials;
- LL. Mumps\*
- MM. Pertussis\* (*Bordetella pertussis*) Submit isolates to the Minnesota Department of Health, Public Health Laboratory
- (9) orthopox virus. Submit clinical materials;
- NN. (10) plague (*Yersinia pestis*). Submit clinical materials;
- OO. (11) poliomyelitis\*. Submit clinical materials;
- PP. Psittacosis (*Chlamydia psittaci*)
- QQ. (12) Q fever (*Coxiella burnetii*). Submit clinical materials;
- RR. (13) rabies (animal and human cases and suspects suspected cases)\*;
- SS. Retrovirus infections (other than HIV)
- TT. Reye's Syndrome
- UU. Rheumatic Fever (cases meeting the Jones Criteria only)
- VV. (14) rubella and congenital rubella syndrome. Submit clinical materials;
- WW. Rocky Mountain Spotted Fever (*Rickettsia rickettsii*, *R. canada*)
- XX. Salmonellosis, including typhoid (*Salmonella* sp.) Submit isolates to the Minnesota Department of Health, Public Health Laboratory
- YY. Shigellosis (*Shigella* sp.) Submit isolates to the Minnesota Department of Health, Public Health Laboratory
- ZZ. Streptococcal disease (all invasive disease caused by Groups A and B streptococci and *S. pneumoniae*) Submit isolates to the Minnesota Department of Health, Public Health Laboratory
- AAA. Syphilis\* (*Treponema pallidum*)
- BBB. Tetanus (*Clostridium tetani*)
- CCC. Toxic Shock Syndrome Submit isolates to the Minnesota Department of Health, Public Health Laboratory
- DDD. Toxoplasmosis
- EEE. Trichinosis (*Trichinella spiralis*)
- FFF. Tuberculosis (*Mycobacterium tuberculosis* and *Mycobacterium Bovis*) Submit isolates to the Minnesota Department of Health, Public Health Laboratory
- (15) severe acute respiratory syndrome (SARS). Submit clinical materials;
- (16) smallpox (variola). Submit clinical materials; and
- GGG. (17) tularemia (*Francisella tularensis*). Submit clinical materials.
- HHH. Typhus (*Rickettsia species*)
- HH. Yellow Fever
- JJJ. Yersiniosis (*Yersinia* sp.) Submit isolates to the Minnesota Department of Health, Public Health Laboratory
- B. Diseases reportable within one working day:
- (1) amebiasis (*Entamoeba histolytica/dispar*);
- (2) anaplasmosis (*Anaplasma phagocytophilum*);
- (3) arboviral disease, including, but not limited to, LaCrosse encephalitis, eastern equine encephalitis, western equine encephalitis, St. Louis encephalitis, and West Nile virus disease;
- (4) babesiosis (*Babesia* spp.);
- (5) blastomycosis (*Blastomyces dermatitidis*);
- (6) campylobacteriosis (*Campylobacter* spp.). Submit clinical materials;
- (7) cat scratch disease (infection caused by *Bartonella* species);
- (8) chancroid (*Haemophilus ducreyi*);
- (9) *Chlamydia trachomatis* infections;
- (10) coccidioidomycosis;
- (11) cryptosporidiosis (*Cryptosporidium* spp.). Submit clinical materials;
- (12) cyclosporiasis (*Cyclospora* spp.). Submit clinical materials;
- (13) dengue virus infection;
- (14) *Diphyllobothrium latum* infection;
- (15) ehrlichiosis (*Ehrlichia* spp.);
- (16) encephalitis (caused by viral agents);

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## Proposed Rules

- (17) enteric *Escherichia coli* infection (*E. coli* O157:H7, other enterohemorrhagic (Shiga toxin-producing) *E. coli*, enteropathogenic *E. coli*, enteroinvasive *E. coli*, and enterotoxigenic *E. coli*). Submit clinical materials;
- (18) *Enterobacter sakazakii* in infants under one year of age. Submit clinical materials;
- (19) giardiasis (*Giardia lamblia*);
- (20) gonorrhea (*Neisseria gonorrhoeae* infections);
- (21) *Haemophilus influenzae* disease (all invasive disease). Submit clinical materials;
- (22) hantavirus infection;
- (23) hepatitis (all primary viral types including A, B, C, D, and E);
- (24) histoplasmosis (*Histoplasma capsulatum*);
- (25) human immunodeficiency virus (HIV) infection, including acquired immunodeficiency syndrome (AIDS). Submit clinical materials;
- (26) influenza (unusual case incidence, critical illness, or laboratory confirmed cases). Submit clinical materials;
- (27) Kawasaki disease;
- (28) *Kingella* spp. (invasive only). Submit clinical materials;
- (29) legionellosis (*Legionella* spp.). Submit clinical materials;
- (30) leprosy (Hansen's disease) (*Mycobacterium leprae*);
- (31) leptospirosis (*Leptospira interrogans*);
- (32) listeriosis (*Listeria monocytogenes*). Submit clinical materials;
- (33) Lyme disease (*Borrelia burgdorferi*);
- (34) malaria (*Plasmodium* spp.);
- (35) meningitis (caused by viral agents);
- (36) mumps;
- (37) neonatal sepsis (bacteria isolated from a sterile site, excluding coagulase-negative *Staphylococcus*) less than seven days after birth. Submit clinical materials;
- (38) pertussis (*Bordetella pertussis*). Submit clinical materials;
- (39) psittacosis (*Chlamydia psittaci*);
- (40) retrovirus infections;
- (41) Reye syndrome;
- (42) rheumatic fever (cases meeting the Jones criteria only);
- (43) Rocky Mountain spotted fever (*Rickettsia rickettsii*, *R. canada*);
- (44) salmonellosis, including typhoid (*Salmonella* spp.). Submit clinical materials;
- (45) shigellosis (*Shigella* spp.). Submit clinical materials;
- (46) *Staphylococcus aureus* (only vancomycin-intermediate *Staphylococcus aureus* (VISA), vancomycin-resistant *Staphylococcus aureus* (VRSA), and death or critical illness due to community-associated *Staphylococcus aureus* in a previously healthy individual). Submit clinical materials;
- (47) streptococcal disease (all invasive disease caused by Groups A and B streptococci and *S. pneumoniae*). Submit clinical materials;
- (48) syphilis (*Treponema pallidum*);
- (49) tetanus (*Clostridium tetani*);
- (50) toxic shock syndrome. Submit clinical materials;
- (51) toxoplasmosis (*Toxoplasma gondii*);
- (52) transmissible spongiform encephalopathy;
- (53) trichinosis (*Trichinella spiralis*);
- (54) tuberculosis (*Mycobacterium tuberculosis* complex) (pulmonary or extrapulmonary sites of disease, including laboratory confirmed or clinically diagnosed disease). Latent tuberculosis infection is not reportable. Submit clinical materials;
- (55) typhus (*Rickettsia* spp.);
- (56) varicella zoster disease:
- (a) primary (chickenpox): unusual case incidence, critical illness, or laboratory confirmed cases. Submit clinical materials; and
- (b) recurrent (shingles): unusual case incidence or critical illness. Submit clinical materials;
- (57) varicella zoster disease in addition to reportable disease under subitem (56), effective upon the commissioner's determination that the disease is reportable under part 4605.7042;
- (58) *Vibrio* spp. Submit clinical materials;
- (59) yellow fever; and
- (60) yersiniosis, enteric (*Yersinia* spp.).

# Proposed Rules

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Submit clinical materials.

## **4605.7042 VARICELLA ZOSTER DISEASE.**

The commissioner shall require reporting of varicella zoster disease under part 4605.7040, item B, subitem (57), if the commissioner determines that sentinel surveillance can no longer provide adequate data for epidemiological purposes.

## **4605.7044 CHRONIC INFECTIONS; PERINATALLY TRANSMISSIBLE.**

Pregnancy in a person chronically infected with hepatitis B, human immunodeficiency virus (HIV) infection, including acquired immunodeficiency syndrome (AIDS), or other reportable perinatally transmissible diseases shall be reported to the commissioner within one working day of knowledge of the pregnancy.

## **4605.7046 SENTINEL SURVEILLANCE.**

Subpart 1. **Disease selection.** The commissioner may select an infectious disease or syndrome for sentinel surveillance, other than a disease or syndrome for which general reporting is required under this chapter, if the commissioner determines that sentinel surveillance will provide adequate data for epidemiological purposes and the surveillance is necessary for:

- A. characterization of the pathogen;
- B. monitoring vaccine effectiveness; or
- C. achieving other significant public health purposes for a disease or syndrome that can cause serious morbidity or mortality.

Subp. 2. **Site selection.** The commissioner shall select, after consultation with the sites, sentinel surveillance sites that have epidemiological significance to each disease or syndrome selected under subpart 1. In selecting the sites, the commissioner shall consider:

- A. the potential number of cases at the site;
- B. the geographic distribution of cases or potential cases in Minnesota, if indicated by the epidemiology of the disease or syndrome;
- C. the epidemiology of the disease or syndrome; and
- D. the overall impact of sentinel surveillance on a site and the benefit to public health in conducting sentinel surveillance at the site.

Subp. 3. **Removal from sentinel surveillance.** The commissioner shall remove a disease or syndrome from sentinel surveillance under this part if the commissioner determines that the disease or syndrome no longer meets the criteria in subpart 1.

Subp. 4. **Surveillance mechanism.** The commissioner shall provide a description, in writing, to sentinel surveillance sites of a specific, planned mechanism for surveillance of the disease or syndrome, including the rationale for site selection, a time frame for reporting, and protocols for the submission of test results and clinical materials from cases and suspected cases to the Minnesota Department of Health, Public Health Laboratory.

## **4605.7050 UNUSUAL CASE INCIDENCE.**

Subpart 1. **Cases, suspected cases, or increased incidence.** Any pattern of cases, suspected cases, or increased incidence of any illness beyond the expected number of cases in a given period, which may indicate a newly recognized infectious agent, an outbreak, epidemic, ~~emerging drug resistance~~, or ~~related~~ public health hazard, including suspected or confirmed outbreaks of food or waterborne disease, epidemic viral gastroenteritis, and any disease known or presumed to be transmitted by transfusion of blood or blood products, ~~must~~ shall be reported immediately by telephone, by the person having knowledge, to the commissioner.

Subp. 2. **Unexplained death or critical illness.** Any unexplained death ~~or unexplained critical illness in a previously healthy individual~~ which may be caused by an infectious agent ~~must~~ shall be reported by the attending physician, medical examiner or coroner, or by the person having knowledge about the death ~~or illness~~ to the commissioner within one day.

Subp. 3. **Submissions.** Upon request of the commissioner, medical laboratories shall submit test results and clinical materials for cases and suspected cases reported under subparts 1 and 2 to the Minnesota Department of Health, Public Health Laboratory.

## **4605.7060 CASES, SUSPECTED CASES, CARRIERS, AND DEATHS DUE TO DISEASE ACQUIRED OUTSIDE THE STATE.**

A physician shall report to the commissioner cases, suspected cases, ~~carriers~~, and deaths due to any infectious disease that a physician determines ~~have~~ has been acquired outside the state; and ~~which are that is~~ is considered:

- A. rare or unusual in Minnesota; or
- B. a public health problem in the geographic area of presumed acquisition, ~~must be reported to the commissioner.~~

## **4605.7070 OTHER REPORTS.**

It shall be the duty of any person in charge of any institution, school, child care facility or camp, or any other person having knowledge of any disease which may threaten the public health, to report immediately the name and address of any ~~persons~~ person or deceased person suspected of having the disease to the commissioner.

## **4605.7075 TUBERCULOSIS; SPECIAL REPORTING.**

A physician ~~must immediately~~ or other person required to report under part 4605.7030 or *Minnesota Statutes*, section 144.4804, shall within one working day report to the commissioner of health the name, address, and essential facts of the case if the physician or other person required to report under part 4605.7030 or *Minnesota Statutes*, section 144.4804, has reason to believe that a person with active pulmonary tuberculosis:

- A. refuses treatment for active tuberculosis; or
- B. has not complied with prescribed therapy for active tuberculosis.

## **4605.7080 NEW DISEASES AND SYNDROMES; REPORTING AND SUBMISSIONS.**

Subpart 1. Disease selection. The commissioner shall, by public notice, ~~request~~ require reporting of newly recognized or emerging diseases and syndromes suspected to be of infectious origin or previously controlled or eradicated infectious diseases if:

- A. the disease or syndrome can cause serious morbidity or mortality; and
- B. report of the disease or syndrome is necessary to monitor, prevent, or control the disease or syndrome to protect public health.

Subp. 2. Surveillance mechanism. The commissioner shall describe a specific, planned mechanism for surveillance of the disease or syndrome including persons and entities required to report, a time frame for reporting, and protocols for the submission of infectious agents isolated test results and clinical materials from cases and suspected cases to the Minnesota Department of Health, Public Health Laboratory.

## **4605.7090 DISEASE REPORT INFORMATION.**

Reports that are required ~~in parts 4605.7030 and 4605.7050~~ under this chapter shall contain as much of the following information as is known:

- A. disease (whether a case, suspected case, carrier, or death);
- B. date of first symptoms;
- C. primary signs and symptoms;
- D. patient:
  - (1) name;
  - (2) birthdate;
  - (3) gender;
  - (4) ethnic or and racial origin;
  - (4) (5) residence address, city, county, and zip code;
  - (5) ~~phone~~ (6) telephone number; and
  - (6) (7) place of work, school, or child care;
- E. date of report;
- F. physician name, address, and ~~phone~~ telephone number;
- G. name of hospital (if any);
- H. name of person reporting (if not physician);
- I. diagnostic laboratory findings and dates of test tests;
- J. name and locating information of contacts (if any); ~~and~~
- K. vaccination history for the disease reported;
- L. pregnancy status and expected date of delivery, if the infection can be transmitted during pregnancy or delivery; and
- M. other information pertinent to the case.

## **4605.7100 REPORTS TO STATE AND LOCAL BOARDS OF HEALTH.**

Upon receipt of information or other knowledge of a case, suspected case, carrier, or death or any disease or report required ~~in part 4605.7030~~ under this chapter, the board of health as defined in *Minnesota Statutes*, section 145A.02, subdivision 2, shall immediately forward same to the commissioner.

## **4605.7500 DISEASE INVESTIGATIONS.**

The commissioner shall investigate the occurrence of cases, suspected cases, or carriers of reportable diseases or unusual disease occurrences in a public or private place for the purpose of verification of the existence of disease, ascertaining the source of the disease causing agent, identifying unreported cases, locating and evaluating contacts of cases and suspected cases, identifying those at risk of disease, determining necessary control measures, and informing the public if necessary.

# Proposed Rules

## 4605.7700 SEXUALLY TRANSMITTED DISEASE; SPECIAL REPORTS.

The following special reports must shall be given by physicians to the commissioner:

A. Notwithstanding any previous report, physicians who have reason to believe that a person having ~~chlamydia trachomatis~~ chlamydia trachomatis chlamydia infection, syphilis, gonorrhea, or chancroid has not completed therapy must shall notify the commissioner immediately of that person's name, address, and other pertinent information.

B. Notwithstanding any previous report, physicians who treat persons infected with ~~chlamydia trachomatis~~ chlamydia trachomatis chlamydia infection, syphilis, gonorrhea, or chancroid must shall ensure that ~~sexual~~ sexual contacts are treated or provide the names and addresses of ~~sexual~~ sexual contacts who may also be infected to the commissioner. If known, persons named as ~~sexual contacts or needlesharing~~ sexual contacts or needlesharing contacts to a person with human immunodeficiency virus (HIV) infection must, including acquired immunodeficiency syndrome (AIDS), shall be reported to the commissioner.

C. Notwithstanding any previous report, physicians must shall immediately report to the commissioner the name, address, and essential facts of the case for any person known to have or suspected of ~~being infected with chlamydia trachomatis~~ having chlamydia infection, syphilis, gonorrhea, or chancroid who refuses treatment.

D. If resources are available, the commissioner may authorize specific outpatient or inpatient facilities to report cases of specific sexually transmitted diseases and clinical syndromes in addition to those specified in part 4605.7040. The diseases and clinical syndromes to be reported shall include urethritis in males, pelvic inflammatory disease, genital herpes simplex infection, ectopic pregnancy, and other sexually transmitted disease as requested by the commissioner.

## 4605.7800 HEALTH EDUCATION.

Health care providers working with patients having ~~chlamydia trachomatis~~ chlamydia trachomatis chlamydia infection, syphilis, gonorrhea, ~~or~~ or chancroid must, or human immunodeficiency virus infection (HIV), including acquired immunodeficiency syndrome (AIDS), shall tell the patients how to prevent the spread of the ~~sexually transmitted disease; infection and~~ sexually transmitted disease; infection and inform them of the importance of complying with treatment instructions; and of the need to have all relevant ~~sexual~~ sexual contacts promptly tested and treated for the ~~specific sexually transmitted disease infection.~~ specific sexually transmitted disease infection.

## Adopted Rules

A rule becomes effective after the requirements of *Minnesota Statutes* §§ 14.05-14.28 have been met and five working days after the rule is published in the *State Register*, unless a later date is required by statutes or specified in the rule. If an adopted rule is identical to its proposed form as previously published, a notice of adoption and a citation to its previous *State Register* publication will be printed. If an adopted rule differs from its proposed form, language which has been deleted will be printed with strikeouts and new language will be underlined. The rule's previous *State Register* publication will be cited.

**KEY: Proposed Rules** - Underlining indicates additions to existing rule language. ~~Strikeouts~~ indicate deletions from existing rule language. If a proposed rule is totally new, it is designated "all new material." **Adopted Rules** - Underlining indicates additions to proposed rule language. ~~Strikeout~~ indicates deletions from proposed rule language.

## Board of Architecture, Engineering, Land Surveying, Landscape Architecture, Geoscience, and Interior Design Adopted Permanent Rules Relating to Landscape Architects

The rules proposed and published at *State Register*, Volume 29, Number 6, pages 149-155, August 9, 2004 (29 SR 149), are adopted with the following modifications:

### 1800.0500 FEES.

Subpart 1. **Requirements.** Application for examination as an architect, professional engineer, land surveyor, professional geologist, or professional soil scientist shall be accompanied by a fee in the amount established by the applicable national testing agency, and an application fee and examination monitoring fee as provided by *Minnesota Statutes*, section 326.105, ~~except that an application for examination as an architect does not require the accompanying examination fee or the examination monitoring fee.~~ The actual fee for examination as an architect shall be paid to the national testing agency in a manner it prescribes.

An application for licensure as an architect, professional engineer, land surveyor, landscape architect, professional geologist, or professional soil scientist shall include the initial fee for licensure as provided by *Minnesota Statutes*, section 326.105. An applicant application

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# Adopted Rules

for certification as a certified interior designer shall include the initial fee for certification as provided by *Minnesota Statutes*, section 326.105. Comity applicants applying under part 1800.0800, item G, I, or J, shall pay an application fee under subpart 7, item A. Upon approval by the board, an applicant for licensure as a land surveyor by comity under part 1800.0800, item H, shall submit an examination fee in the amount established by the local testing agency and an examination monitoring fee as provided in *Minnesota Statutes*, section 326.105.

As provided in *Minnesota Statutes*, section 326.105, an application for renewal of licensure as an architect, professional engineer, land surveyor, landscape architect, professional geologist, professional soil scientist, or for certification as a certified interior designer shall be accompanied by a renewal fee.

As provided in *Minnesota Statutes*, section 326.105, an applicant for examination as an engineer-in-training, land surveyor-in-training, geologist-in-training, or soil scientist-in-training shall be accompanied by an examination fee in the amount established by the applicable national testing agency, an application fee, and an examination monitoring fee.

Information concerning the current examination fee charged by the applicable national testing agency may be obtained by contacting the board offices. A new application for examination, in such instances, may be filed at any time after the lapse of six months next succeeding the date of the previous rejection. A reexamination application shall be submitted each time the applicant applies to take the examination except as provided in subpart 2.

## 1800.1500 EDUCATION AND EXPERIENCE.

### Subp. 5. Exception for non-LAAB-accredited education.

A. An applicant for licensure who does not meet the requirements of subparts 3 and 4 may also qualify for licensure if evidence is submitted to the board that the education and subsequent experience of the applicant meet the requirements in the following table:

Classification	Professional Education (years)	Professional Experience (years)	Total Education and Experience
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Other Related Degree

Plus Graduate of

LAAB Accredited

Graduate L.A.

Curriculum

5

3

8

Subp. 6. **Qualifying experience defined.** As used in this part, “qualifying experience” consists of varied, progressive, nonrepetitive, practical experience at landscape architectural work, developing the ability to apply the theoretical knowledge gained during academic training in making sound judgments in solving landscape architectural problems. The experience shall include landscape architectural elements of programming; site and environmental analysis; schematics; coordination with other disciplines; site cost analysis; code research; design development documents; construction documents; specifications; document checking; bidding and contract negotiation; construction phase including office and construction phase, on-site observation, project management, and client contact; office management; and research other than code or project-related research. Experience shall be written in detail and submitted with the application for licensure for evaluation and approval by the board.

## Department of Health

### Adopted Permanent Rules Relating to Radiation Safety

The rules proposed and published at *State Register*, Volume 28, Number 46, pages 1452-1454, May 17, 2004 (28 SR 1452), are adopted with the following modifications:

#### 4731.0100 DEFINITIONS.

Subp. 22. **Authorized medical physicist.** “Authorized medical physicist” means an individual who:

B. is identified as an authorized medical physicist or teletherapy physicist on:

- (1) a specific medical use license issued by the ~~commissioner~~, the NRC; or an agreement state;
- (2) a medical use permit issued by a ~~commissioner~~ an NRC master material licensee;
- (3) a permit issued by a ~~commissioner~~, an NRC; or agreement state broad scope medical use licensee; or
- (4) a permit issued by a ~~commissioner~~ an NRC master material licensee broad scope medical use permitted.

Subp. 23. **Authorized nuclear pharmacist.** “Authorized nuclear pharmacist” means a pharmacist who:

# Adopted Rules

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B. is identified as an authorized nuclear pharmacist on:

(1) a specific license issued by ~~the commissioner, the~~ NRC; or an agreement state that authorizes medical use or the practice of nuclear pharmacy;

(2) a permit issued by ~~a commissioner~~ an NRC master material licensee that authorizes medical use or the practice of nuclear pharmacy;

(3) a permit issued by ~~a commissioner, an~~ NRC; or agreement state broad scope medical use licensee that authorizes medical use or the practice of nuclear pharmacy; or

(4) a permit issued by ~~a commissioner~~ an NRC master material licensee broad scope medical use permitted that authorizes medical use or the practice of nuclear pharmacy;

Subp. 24. **Authorized user.** “Authorized user” means:

B. a licensed practitioner of the healing arts who:

(1) meets the requirements in part 4731.4415; and in parts 4731.4433, 4731.4436, 4731.4443 to 4731.4445, 4731.4459, 4731.4461, or 4731.4479; or

(2) is identified as an authorized user on:

(a) ~~a commissioner, an~~ NRC; or agreement state license that authorizes the medical use of radioactive material;

(b) a permit issued by ~~a commissioner~~ an NRC master material licensee that is authorized to permit the medical use of radioactive material;

(c) a permit issued by ~~a commissioner, an~~ NRC; or agreement state specific licensee of broad scope that is authorized to permit the medical use of radioactive material; or

(d) a permit issued by ~~a commissioner~~ an NRC master material license broad scope permittee that is authorized to permit the medical use of radioactive material.

Subp. 49. **Controlled area.** “Controlled area” means an area:

~~A. outside of a restricted area but inside the site boundary, access to which can be limited by the licensee or registrant for any reason; or~~

~~B. in which the exposure of persons to radiation is under the supervision of a radiation safety officer.~~

~~A controlled area requires a control of access, occupancy, and working conditions for radiation protection purposes.~~

Subp. 64a. **Dose commitment.** “Dose commitment” means the total radiation dose to a part of the body that will result from retention in the body of radioactive material. For purposes of estimating the dose commitment, it is assumed from the time of intake the period of exposure to retained material will not exceed 50 years.

Subp. 75. **Entrance or access point.** “Entrance” or “access point” means any location through which an individual could gain access to radiation areas or to radioactive materials. Entrance or access point includes entry or exit portals of sufficient size to permit human entry, irrespective of their intended use.

Subp. 88. **General license.** “General license” means a license that ~~permits the licensee to obtain and use source material such as uranium in less than stipulated quantities or to obtain other radionuclides in quantities no greater than the amount permitted in the license for commercial, industrial, or research purposes, but not for external or internal administration to human beings is provided by rule, grants authority to a person for certain activities involving radioactive material, and is effective without the filing of an application with the commissioner or the issuance of a licensing document to a particular person. The commissioner may require registration by the particular general licensee.~~

Subp. 90. **Government agency.** “Government agency” means an executive department, commission, independent establishment, or corporation wholly or partly owned by the United States ~~or the state of Minnesota~~ and which is an instrumentality of the United States ~~or the state of Minnesota~~ or a board, bureau, division, service, office, officer, authority, administration, or other establishment in the executive branch of federal government.

Subp. 92. **Guide tube or projection sheath.** “Guide tube” or “projection sheath” means a flexible or rigid tube, such as a “J” tube, for guiding the source assembly and the attached control cable from the exposure device to the exposure head. Guide tube or projection sheath includes the connections necessary for attachment to the exposure device and to the exposure head.

Subp. 96a. **High integrity container or HIC.** “High integrity container” or “HIC” means a container commonly designed to meet the structural stability requirements of Code of Federal Regulations, title 10, section 61.56, and to meet the United States Department of Transportation requirements for a Type A package.

Subp. 185. **Quarter.** “Quarter” means a period of time equal to one-fourth of the year observed by the licensee or registrant, approximately 13 consecutive weeks. ~~A quarterly test must be performed approximately 13 weeks apart, four times per year, provided that the first quarter in a year coincides with the starting date of the year and that no day is omitted or duplicated in consecutive quarters.~~

Subp. 193. **Radiation safety officer or RSO.** “Radiation safety officer” or “RSO” is an individual who:

A. has the training, knowledge, authority, and responsibility to apply appropriate radiation protection regulations according to ~~parts~~ part 4731.4130; or parts 4731.4411; and 4731.4415 on behalf of the licensee; and

B. for radioactive materials in the healing arts:

(1) meets the requirements in this chapter; or

(2) is identified as the radiation safety officer in:

(a) a specific medical use license issued by the ~~commissioner, the NRC;~~ or an agreement state; or

(b) a medical use permit issued by ~~a commissioner~~ an NRC master material licensee.

Subp. 215. **Sievert or Sv.** “Sievert” or “Sv” is the SI unit of any of the quantities expressed as dose equivalent. The dose equivalent in sieverts is equal to the absorbed dose in grays multiplied by the quality factor identified in subpart 183 (1 Sv = ~~0.01~~ 100 rems).

Subp. 259. **Very high radiation area.** “Very high radiation area” means an area accessible to individuals in which radiation levels from radiation sources external to the body could result in an individual receiving an absorbed dose in excess of 500 rads (5 Gy) in one hour at one meter from a radiation source or one meter from any surface that the radiation ~~generates~~ penetrates. At very high doses received at high dose rates, units of absorbed dose (rads and grays) are appropriate, rather than units of dose equivalent (rems and sieverts).

## 4731.0200 GENERAL APPLICATIONS.

Subpart 1. **Purpose.** Radiation can be instrumental in the improvement of health, welfare, and productivity of the public if properly used but may impair the health of people and the industrial and agricultural potentials of the state if improperly used. The commissioner has the statutory authority and duty to adopt, amend, and enforce rules to prevent dangers to public health from radiation. This includes the preservation and protection of public health; control of radiation producing devices and radioactive sources; the handling, storage, transportation, use, and disposal of radioactive isotopes and fissionable materials within the state; and securing information concerning the nature and extent of the use of radioactive material within this state.

Subp. 2. **Applicability.**

Subp. 3. **Exemptions or variances.** The commissioner may, according to parts 4717.7000 to 4717.7050, grant an exemption or variance from the requirements of this chapter, if it is determined to be authorized by law, would not endanger life or property, and is otherwise in the public interest.

Subp. 4. **Responsibilities.**

Subp. 5. **Submissions.** Except as otherwise specified in this chapter, all communications and reports under this chapter must be addressed to or delivered in person to: Minnesota Department of Health, Radioactive Materials Unit, 1645 Energy Park Drive, Suite 300, St. Paul, Minnesota, 55108-2970.

Subp. 6. **Interpretations.** Except as specifically authorized by the commissioner in writing, no interpretation of this chapter by any officer or employee of the commissioner, other than a written interpretation by the attorney general, is binding upon the commissioner.

## 4731.0355 RECIPROCITY.

Subp. 3. **Licenses of radioactive material, source and special nuclear material in quantities not sufficient to form a critical mass.**

E. The commissioner may waive the requirement for filing additional written notifications during the remainder of the one-year reciprocity period following the receipt of the initial notification from a person engaging in activities under the general license granted under item A:

F. Failure to provide the required information or fee may result in denial of reciprocity privileges.

G. ~~E.~~ Notwithstanding item A, a person who holds a specific license issued by the NRC or an agreement state authorizing the holder to manufacture, transfer, install, or service a device described in parts 4731.3200 to 4731.3245 within areas subject to the jurisdiction of the licensing body is granted a general license to install, transfer, demonstrate, or service the device if:

H. ~~G.~~ The commissioner may withdraw, limit, or qualify acceptance of a specific license or equivalent licensing document issued by the NRC or an agreement state or a product distributed under the licensing document upon determining that the action is necessary to prevent undue hazard to public health and safety or property.

## 4731.0400 SCOPE; ENFORCEMENT NOTICE.

Subp. 4. **Enforcement notice.** This part is notice to all persons who knowingly provide to any licensee; radiographer ~~certification~~ certification holder; quality assurance program approval holder; applicant for a license, radiographer ~~certification~~ certification, or quality assurance program approval; or contractor or subcontractor of any of them components, equipment, materials, or other goods or services, that relate to a licensee's, ~~certification~~ certification holder's, quality assurance program approval holder's, or applicant's activities subject to parts 4731.0400 to 4731.0424, that they may be individually subject to the commissioner's enforcement action for violation of part 4731.0405.

## 4731.0405 DELIBERATE MISCONDUCT.

Subpart 1. **Applicability.** This part applies to:

# Adopted Rules

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B. an industrial radiographer ~~certification~~ certificate holder;

Subp. 2. **Prohibition.** A person under subpart 1 who knowingly provides to another person under subpart 1 any components, materials, or other goods or services that relate to a licensee's, ~~certification~~ certificate holder's, quality assurance program approval holder's, or applicant's activities subject to this chapter may not:

A. engage in deliberate misconduct that causes or would have caused, if not detected, a licensee, ~~certification~~ certificate holder, quality assurance program approval holder, or applicant to be in violation of a rule; order; or term, condition, or limitation of any license, certification, or approval issued by the commissioner, the NRC, or an agreement state; or

B. deliberately submit to the NRC or an agreement state, a licensee, a ~~certification~~ certificate holder, a quality assurance program approval holder, an applicant for a license, certification, or quality assurance program approval, or a licensee's, applicant's, ~~certification~~ certificate holder's, or quality assurance program approval holder's contractor or subcontractor, information that the person submitting the information knows to be incomplete or inaccurate in some respect material to the NRC or an agreement state.

Subp. 4. **Definition.** For purposes of subpart 2, deliberate misconduct by a person means an intentional act or omission that the person knows:

A. would cause a licensee, ~~certification~~ certificate holder, quality assurance program approval holder, or applicant for a license, certification, or quality assurance program approval to be in violation of any rule; order; or term, condition, or limitation of a license or certification issued by the NRC or an agreement state; or

B. constitutes a violation of a requirement, procedure, instruction, contract, purchase order, or policy of a licensee, ~~certification~~ certificate holder, quality assurance program approval holder, or applicant or the contractor or subcontractor of any of them.

## 4731.0420 QUALITY ASSURANCE REQUIREMENTS.

~~Subp. 2. **Approval of program.** Before using any package for the shipment of licensed material subject to parts 4731.0400 to 4731.0424, a licensee must obtain commissioner approval of its quality assurance program. A licensee must file a description of its quality assurance program with the commissioner, including a discussion of which requirements of parts 4731.0400 to 4731.0424 are applicable and how they will be satisfied.~~

~~Subp. 3. 2. **Radiography containers.** A program for transport container inspection and maintenance limited to radiographic exposure devices, source changers, or packages transporting these devices and meeting the requirements of part 4731.4090, subpart 2, item A, or an equivalent requirement of the NRC or an agreement state, is deemed to satisfy the requirements of subpart 1 and part 4731.0406, subpart 2.~~

## 4731.0565 APPLICATION; FILING.

Subpart 1. **Generally.**

A. A person may apply for a specific license issued under parts 4731.0525 to 4731.0630 by filing an application according to part 4731.0200, subpart 5 4.

## 4731.0580 APPLICATION; FINANCIAL ASSURANCE AND RECORD KEEPING FOR DECOMMISSIONING.

Subp. 6. **Record keeping.** A licensee must keep records of information important to the decommissioning of a facility in an identified location until the site is released for unrestricted use. If records important to the decommissioning of a facility are kept for other purposes, reference to the records and their location may be used. Information the commissioner considers important to decommissioning ~~include~~ includes:

## 4731.0600 LICENSE EXPIRATION AND TERMINATION; DECOMMISSIONING.

Subp. 2. **Decommissioning.**

A. Within 60 days of any of the occurrences under item B, and consistent with the administrative directions under part 4731.0200, subpart 4 3, a licensee must provide notification to the commissioner in writing of such occurrence and:

## 4731.0620 REPORTING REQUIREMENTS.

Subp. 2. **24-hour notification required.** A licensee must notify the commissioner within 24 hours after discovery of any of the following events involving licensed material:

C. an event that requires unplanned medical treatment at a medical facility of an individual with spreadable radioactive contamination on the individual's clothing or body; ~~and~~ or

## 4731.0750 GENERAL LICENSE; USE OF CERTAIN INDUSTRIAL PRODUCTS OR DEVICES.

Subp. 2. **Scope.** The general license issued under subpart 1 applies only to industrial products or devices that have been manufactured or initially transferred according to a specific license issued under part 4731.0770 or according to a specific license issued ~~to~~ by the NRC

or an agreement state that authorizes manufacture of the products or devices for distribution to persons generally licensed by the NRC or an agreement state.

### **4731.0780 FINANCIAL ASSURANCE AND RECORD KEEPING FOR DECOMMISSIONING.**

#### **Subp. 3. Between ten mCi and 100 mCi.**

A. An applicant for a specific license authorizing possession and use of quantities of source material greater than ten millicuries (370 MBq) but less than or equal to 100 millicuries (3.7 GBq) in a readily dispersible form must:

### **4731.0790 LICENSE EXPIRATION AND TERMINATION; DECOMMISSIONING.**

Subp. 5. **Exemptions.** Specific licenses for uranium and thorium milling are ~~except exempt~~ from subpart 4, items B, subitem (4), and D to I, with respect to reclamation of tailings impoundments and waste disposal areas.

### **4731.1090 DISCRIMINATION PROHIBITED.**

No person, on the grounds of ~~sex, race, or other discriminations,~~ may color, creed, religion, national origin, sex, disability, sexual orientation, or age, shall be excluded from participation in; denied the benefits of; or subjected to discrimination under any program or activity licensed by the commissioner. This part shall be enforced according to *Minnesota Statutes*, sections 181.931 to 181.935.

### **4731.2600 REPORTS; THEFT OR LOSS OF LICENSED MATERIAL.**

Subp. 2. **Written reports.** A licensee required to make a report under subpart 1 must, within 30 days after making the telephone report, make a written report to the commissioner that includes:

### **4731.2750 ANNUAL LIMITS ON INTAKE AND DERIVED AIR CONCENTRATIONS.**

#### **Subp. 3. Table 1 explanation; occupational values.**

M. The ~~value~~ values of ALI and DAC do not apply directly when the individual both ingests and inhales a radionuclide, when the individual is exposed to a mixture of radionuclides by either inhalation or ingestion or both, or when the individual is exposed to both internal and external irradiation.

#### **Subp. 8. Additional explanations.**

D. If the identity and concentration of each radionuclide in a mixture are known, the limiting values should be derived as follows: determine, for each radionuclide in the mixture, the ratio between the concentration present in the mixture and the concentration otherwise established in this part for the specific radionuclide when not in a mixture. The sum of such ratios for all of the ~~radionuclides~~ radionuclides in the mixture may not exceed one.

### **4731.3015 EXEMPTION; USE OF RADIOACTIVE MATERIAL UNDER CERTAIN FEDERAL CONTRACTS.**

B. In addition to the exemptions under item A, and subject to the requirement for licensing of Department of Energy facilities and activities under the Energy Reorganization Act of 1974, a prime contractor or subcontractor of the Department of Energy or the NRC is exempt from parts 4731.3000 to 4731.3245 to the extent that:

(2) the NRC ~~determines~~ and the commissioner determine that:

### **4731.3040 EXEMPT QUANTITIES.**

Subp. 2. **Receipt under prior license.** A person who possesses radioactive material received or acquired before September 25, 1971, under the general license then provided under Code of Federal Regulations, title 10, section ~~32.4~~ 31.4, is exempt from parts 4731.3000 to 4731.4360 to the extent that the person possesses, uses, transfers, or owns such radioactive material.

### **4731.3065 SPECIFIC LICENSES; APPLICATION.**

Subp. 5. **Emergency plan.** An emergency plan submitted under subpart 4, item A, subitem (2), must include:

L. provisions for conducting quarterly communications checks with off-site response organizations and biennial on site exercises to test response to simulated emergencies. Quarterly communications ~~check~~ checks with off-site response organizations must include checking and updating all necessary telephone numbers. The licensee must invite off-site response organizations to participate in the biennial exercises. Participation of off-site response organizations in biennial exercises, although recommended, is not required. Exercises must use accident scenarios postulated as most probable for the specific site and the scenarios must not be known to most exercise participants. The licensee must critique the exercises using individuals not having direct implementation responsibility for the plan. Critiques of exercises must evaluate the appropriateness of the plan, emergency procedures, facilities, equipment, training of personnel, and overall effectiveness of the response. Deficiencies found by the critiques must be corrected; and

# Adopted Rules

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## 4731.3085 LICENSE EXPIRATION AND TERMINATION; DECOMMISSIONING.

### Subp. 4. Decommissioning.

A. Within 60 days of any of the occurrences under item B, and consistent with the administrative directions under part 4731.0200, subpart 4 ~~3~~, a licensee must provide notification to the commissioner in writing of such occurrence and:

## 4731.3220 GENERAL LICENSE; INSTALLATION OF GENERALLY LICENSED DEVICES.

A person who holds a specific license issued by ~~the commissioner~~, the NRC; or an agreement state authorizing the holder to manufacture, install, or service a device described under part 4731.3215 ~~within an agreement state~~ is issued a general license to install and service such device in a ~~state that is not an agreement state and a general license to install and service such device in offshore waters~~ areas subject to the commissioner's authority, if:

## 4731.3225 GENERAL LICENSE; LUMINOUS SAFETY DEVICES FOR AIRCRAFT.

Subpart 1. **License issued.** A general license is issued to own, receive, acquire, possess, and use tritium or promethium-147 contained in luminous safety devices for use in aircraft, provided that:

B. each device:

(2) has been manufactured or assembled according to a specific license issued by the commissioner, the NRC, or an agreement state that authorizes the manufacture or assembly of the device for distribution to persons generally licensed by the commissioner, the NRC, or an agreement state.

## 4731.3240 GENERAL LICENSE; STRONTIUM-90 ICE DETECTION DEVICES.

Subpart 1. **License issued.** A general license is issued to own, receive, acquire, possess, use, and transfer strontium-90 contained in ice detection devices, provided that:

B. each device has been manufactured or initially transferred according to a license issued under part 4731.3380 or according to a specific license issued to the manufacturer by the commissioner, the NRC, or an agreement state that authorizes manufacture of the ice detection devices for distribution to persons generally licensed by the commissioner, the NRC, or an agreement state.

## 4731.3245 GENERAL LICENSE; IN VITRO CLINICAL OR LABORATORY TESTING USE.

Subpart 1. **License issued.** A physician, veterinarian in the practice of veterinary medicine, clinical laboratory, or hospital is issued a general license to receive, acquire, possess, transfer, or use, according to this part, the following radioactive materials in prepackaged units for use in in vitro clinical or laboratory tests not involving internal or external administration of radioactive material, or the radiation therefrom, to human beings or animals:

F. selenium-75, in units not exceeding ten microcuries each; ~~and~~

G. mock iodine-125 reference or calibration sources, in units not exceeding 0.05 microcurie of iodine-129 and 0.005 microcurie of americium-241 each; ~~and~~

H. cobalt-57, in units not exceeding ten microcuries each.

Subp. 3. **Additional requirements.** A person who receives, acquires, possesses, or uses radioactive material under the general license issued under subpart 1 must:

A. not possess at any one time, at any one location of storage or use, a total amount of iodine-125, iodine-131, selenium-75, ~~or iron-59, or cobalt-57~~ in excess of 200 microcuries (7.4 MBq);

Subp. 4. **Limitation.** A general licensee under this part must not receive, acquire, possess, or use radioactive material:

A. except as prepackaged units that are labeled according to:

(2) a specific license issued by the NRC or an agreement state that authorizes the manufacture and distribution of iodine-125, iodine-131, carbon-14, hydrogen-3 (tritium), selenium-75, iron-59, ~~or mock iodine-125, or cobalt-57~~ to persons generally licensed by the ~~commissioner~~ NRC or an agreement state; and

## 4731.3305 SPECIFIC LICENSE; INTRODUCTION OF RADIOACTIVE MATERIAL IN EXEMPT CONCENTRATIONS; TRANSFER OF OWNERSHIP OR POSSESSION.

Subpart 1. **Approval criteria.** An application for a specific license authorizing the introduction of radioactive material into a product or material owned by or in the possession of the licensee or another and the transfer of ownership or possession of the product or material containing the radioactive material shall be approved if the applicant:

C. provides reasonable assurance that the:

(1) concentrations of radioactive material at the time of transfer will not exceed the ~~concentration~~ concentrations under part 4731.3140;

## **4731.3320 SPECIFIC LICENSE; RESINS CONTAINING SCANDIUM-46; MANUFACTURE OR INITIAL TRANSFER.**

An application for a specific license to manufacture, or initially transfer for sale or distribution, synthetic plastic resins containing scandium-46 for use according to part 4731.3035 shall be approved if:

C. the applicant submits the following information:

(2) a description of control procedures to be used to ensure that the concentration of scandium-46 in the final product at the time of distribution does not exceed  $1.4 \times 10^3$   $10^3$  microcurie/milliliter; and

## **4731.3400 SPECIFIC LICENSE; SOURCES OR DEVICES FOR MEDICAL USE; MANUFACTURE AND DISTRIBUTION.**

Subpart 1. **Approval criteria.** An application for a specific license to manufacture and distribute sources and devices containing radioactive material to persons licensed according to parts 4731.4400 to 4731.4527 for use as a calibration or reference source or for the uses listed under parts 4731.4450, 4731.4460, and 4731.4463 shall be approved if:

C. the label affixed to the source ~~of~~ or device, or to the permanent storage container for the source ~~of~~ or device, contains:

## **4731.4120 INDUSTRIAL RADIOGRAPHIC OPERATIONS.**

Subp. 3. **Offshore water operations.** A licensee may conduct lay-barge, offshore platform, or underwater radiography only if procedures have been approved by the commissioner, the NRC, or an agreement state.

## **4731.4170 PERSONNEL MONITORING.**

Subp. 7. **Ratemeter requirements.** An alarm ratemeter must:

B. be set to give an alarm signal at a preset dose rate of 500 millirems per hour (5 mSv/hr), with an accuracy of plus or minus 20 percent of the true radiation ~~does~~ dose rate;

## **4731.4360 RADIOGRAPHER CERTIFICATION.**

Subpart 1. **Requirements for an independent certifying organization.** An independent certifying organization must:

B. make its membership available to the general public nationwide that is not restricted because of race, color, creed, religion, national origin, sex, age, national origin, or disability, sexual orientation, or age;

## **4731.4403 SPECIFIC LICENSE; MEDICAL USE OF RADIOACTIVE MATERIALS.**

Subp. 4. **Notifications of changes.**

C. A licensee must mail required documents to the address under part 4731.0200, subpart ~~5~~ 4.

## **4731.4411 RADIATION SAFETY OFFICER TRAINING.**

Except as provided under part 4731.4414, a licensee must require an individual fulfilling the responsibilities of a radiation safety officer as provided under part 4731.4405 to be an individual who:

B. has completed a structured educational program consisting of:

(2) one year of full-time radiation safety experience under the supervision of an individual identified as the radiation safety officer on an NRC or agreement state license or permit issued by an NRC ~~or agreement state~~ master material licensee that authorizes similar types of uses of radioactive material involving:

## **4731.4432 UNSEALED RADIOACTIVE MATERIAL; UPTAKE, DILUTION, AND EXCRETION STUDIES.**

Except for quantities that require a written directive under part 4731.4408 or 4731.4409, a licensee may use any unsealed radioactive material prepared for medical use for uptake, dilution, or excretion studies that is:

C. obtained from and prepared for a commissioner, NRC, or agreement state licensee for use in research according to a radioactive drug research committee-approved protocol or ~~in~~ an investigational new drug protocol accepted by the Food and Drug Administration; or

## **4731.4433 UPTAKE, DILUTION, AND EXCRETION STUDIES; TRAINING.**

Except as provided under part 4731.4414, a licensee must require the authorized user of unsealed radioactive material for the uses authorized under part 4731.4432 to be a physician who:

C. has training and experience as follows:

(2) has obtained written certification, signed by a preceptor authorized user who meets the requirements of this part, part ~~4731.4432~~ 4731.4432 or 4731.4436 ~~or 4731.4443~~, or equivalent requirements of the NRC or an agreement state, that the individual has satisfactorily completed the requirements in this item and has achieved a level of competency sufficient to function independently as an authorized user for the medical uses authorized under part 4731.4443.

# Adopted Rules

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## 4731.4475 MOBILE REMOTE AFTERLOADER UNITS; ADDITIONAL REQUIREMENTS.

Subp. 2. **Check requirements.** In addition to the periodic spot checks required under part 4731.4473, a licensee authorized to use mobile afterloaders for medical use must perform checks on each remote afterloader unit before use at each address of use. At a minimum, checks must be made to verify the operation of:

- D. applicators, source transfer tubes, and transfer tube-applicator interfaces;

## 4731.4525 MEDICAL EVENT; REPORT AND NOTIFICATION.

Subpart 1. **Report required.** A licensee must report any event, except for an event that results from patient intervention, in which the administration of radioactive material or radiation from radioactive material results in:

A. a dose that differs from the prescribed dose or dose that would have resulted from the prescribed dose by more than five rems (0.05 Sv) effective dose equivalent, 50 rems (0.5 Sv) to an organ or tissue, or 50 rems (0.5 Sv) shallow dose equivalent to the skin and:

(2) the total ~~dose~~ dosage delivered differs from the prescribed dosage by 20 percent or more or falls outside the prescribed dosage range; or

## 4731.7030 AGREEMENT WITH WELL OWNER OR OPERATOR.

Subpart 1. **Agreement required.**

F. If the sealed source is classified as irretrievable after reasonable efforts at recovery have been expended, the following requirements must be implemented within 30 days:

(3) a permanent identification plaque, constructed of a long-lasting material, such as stainless steel, brass, bronze, or Monel, must be mounted at the surface of the well, unless mounting the plaque is not practical. The size of the plaque must be at least seven inches (17 cm) square and one-eighth inch (3 mm) thick. The plaque must contain:

- (h) an appropriate warning, such as, “DO NOT ~~RE-ENTER~~ REENTER THIS WELL.”

## 4731.7070 LEAK TESTING; SEALED SOURCES.

Subp. 4. **Removal of leaking source from service.**

B. The licensee must submit a report to the commissioner within five days of receiving the test results. The report must:

- (3) ~~include~~ describe any contamination that resulted from the leaking source; and

## Department of Labor and Industry

### Adopted Exempt Permanent Rules Relating to Occupational Safety and Health; Adoption of Federal Standards by Reference

The rules proposed and published at *State Register*, Volume 29, Number 16, pages 426-428, October 18, 2004 (29 SR 426), are adopted as proposed.

# Revenue Notices

The Department of Revenue began issuing Revenue Notices in July of 1991. Revenue Notices are statements of policy made by the department that provide interpretation, detail, or supplementary information concerning a particular statute, rule, or departmental practice. The authority to issue Revenue Notices is found in *Minnesota Statutes*, Section 270.0604.

## Department of Revenue

### Revenue Notice #04-10: Sales and Use Tax – Exemption for Fund-Raising Events – Lawful Gambling Activities

*Minnesota Statutes*, section 297A.70, subdivision 14 provides an exemption from the Minnesota sales tax for sales or admission charges related to fund-raising events sponsored by nonprofit groups. The statute provides that the exemption is limited in that all gross receipts are taxable if fund-raising events exceed 24 days per year. The department's position is that lawful gambling activities conducted by a nonprofit group are fund-raising activities and will be counted toward the 24-day limitation period.

Publication Dated: 27 December 2004

John H. Mansun, Assistant Commissioner  
for Tax Policy and External Relations

# Official Notices

Pursuant to *Minnesota Statutes* §§ 14.101, an agency must first solicit comments from the public on the subject matter of a possible rulemaking proposal under active consideration within the agency by publishing a notice in the *State Register* at least 60 days before publication of a notice to adopt or a notice of hearing, and within 60 days of the effective date of any new statutory grant of required rulemaking.

The *State Register* also publishes other official notices of state agencies and non-state agencies, including notices of meetings and matters of public interest.

## Department of Agriculture

### Agricultural Chemical Response Compensation Board (ACRRA Board)

#### Notice of Meeting Schedule

Listed below is the ACRRA Board meeting schedule for the upcoming 2005 calendar year. The ACRRA Board will meet at 9:30 a.m. in Conference Room 1, Minnesota Department of Agriculture Building, 90 West Plato Boulevard, Saint Paul, Minnesota.

Pursuant to *Minnesota Statutes* 18E.05 Subd. 3. "The board must receive a **completed** application at least 30 days before a board meeting in order for a request for reimbursement or payment to be considered at that meeting." To help ensure your application is "complete", submit 30 days prior to deadline (60 days prior to ACRRA Board review). Regular ACRRA Board meetings are scheduled for the third Wednesday of every other month. A scheduled meeting may be canceled due to insufficient funds in the account or if there is insufficient business.

Any changes to scheduled meetings will be announced in the *Minnesota State Register*.

Website: [http://www.comm.media.state.mn.us/bookstore/state\\_register.asp](http://www.comm.media.state.mn.us/bookstore/state_register.asp)

#### ACRRA Board Meeting Schedule: 2005

Submit Application for Staff Review	Staff Reviewed & Completed Deadline	Application Reviewed by ACRRA Board
November 19, 2004	December 17, 2004	January 11, 2005*
January 21, 2005	February 14, 2005	March 16, 2005
March 18, 2005	April 18, 2005	May 18, 2005
May 20, 2005	June 20, 2005	July 20, 2005
July 22, 2005	August 22, 2005	September 21, 2005
September 23, 2005	October 17, 2005	November 16, 2005
November 18, 2005	December 19, 2005	January 18, 2006

\* Re-scheduled ACRRA Board Meeting will meet in the Minnesota Department of Agriculture Building, Commissioner's Conference Room A.

# Official Notices

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## Department of Agriculture

### Notice of Rescheduled ACRRRA Board Meeting

The January 19, 2005, Agricultural Chemical Response Compensation Board (ACRRRA Board) meeting is being rescheduled. This meeting will be held **Tuesday, January 11, 2005** at the Minnesota Department of Agriculture Building, 90 West Plato Boulevard, St. Paul, Minnesota, in the 3<sup>rd</sup> floor Commissioner's Conference Room A, at **9:30 a.m.**

Please call the ACRRRA Program, (651) 297-3490 *or* (651) 296-3349, should you require additional information.

## Department of Agriculture

### Notice of February 3rd ACRRRA Board Retreat

The Agricultural Chemical Response Compensation Board (ACRRRA Board) will meet on **Thursday, February 3, 2005 — 9:00 a.m. - 3:30 p.m.** for a Board retreat. The retreat will be held at Cabela's Outfitters Store • 3900 Cabela Drive • Owatonna, Minnesota. The general public may attend this meeting; however, if you do plan to attend, please RSVP the ACRRRA staff by Tuesday, January 24, 2005. Should you require additional information, please call the ACRRRA Program at (651) 297-3490.

## Minnesota Office of Environmental Assistance

### Local Government Assistance Unit

### REQUEST FOR COMMENTS on Planned Amendments to the Rules Governing the Development, Adoption and Implementation of Solid Waste Management Plans in Greater Minnesota

#### **Minnesota Rules, Chapter 9215, Parts 9215.0500 to 9215.0880**

**Subject of Rules.** The Minnesota Office of Environmental Assistance (OEA or Office) requests comments on its planned amendments to rules governing the development, adoption and implementation of solid waste management plans in greater Minnesota. The current solid waste planning rules were adopted in 1986 and subsequently amended in 1992. Since then, county solid waste management systems have matured, making some of the existing rule requirements obsolete and not as effective as they could be. In 2003, the Legislature revised *Minnesota Statute* § 115A.46 changing the requirement that counties submit a solid waste management plan at least every 5 years to every 10 years. Another change is the addition of the following language: "rules that regulate plan content under subdivision 2 must reflect demographic, geographic, regional and solid waste system differences that exist among the counties."

Accordingly, the OEA plans to amend these planning rule requirements to reflect current solid waste management practices; eliminate rule requirements that are redundant or no longer needed; encourage regional planning where viable and beneficial to those counties involved; and provide counties more flexibility in choosing waste abatement strategies and integrated solid waste management systems that reflect demographic, geographic, regional and solid waste system differences that exist in Greater Minnesota.

**Persons Affected.** The rule amendments will affect those counties that are located outside the Metropolitan Area who are required to develop and submit a solid waste management plans at least every 10 years to the OEA for review and approval. The rules would also likely affect solid waste facility owners and operators, solid waste haulers and recyclers, solid waste engineering and planning consultants and environmental organizations.

**Statutory Authority.** The OEA's authority to adopt and implement these rules is found in *Minnesota Statutes*, section 115A.06, subdivision 2. This broad rulemaking authority consists of..."Unless otherwise provided, the director shall promulgate rules in accordance with Chapter 14 to govern its activities and implement this chapter."

**Public Comment.** Interested persons or groups may submit comments or information on these planned rules in writing or orally until further notice is published in the *State Register* that the Office intends to adopt or to withdraw the rules.

To facilitate comments and field questions on this planned rule, the OEA intends to hold three (3) Informational Meetings for the following dates, times and locations:

<u>Date</u>	<u>Time</u>	<u>Location</u>	<u>Address</u>
February 2, 2005	9:30 am – 12pm	Blue Earth County Gov. Ctr.	Mankato, MN
February 9, 2005	9:30 am – 12pm	MN Dept. of Transportation	Bemidji, MN
February 23, 2005	9:30 am – 12pm	Sherburne County Gov. Ctr.	Elk River, MN

Furthermore, comments may be submitted or other information obtained on these planned rules at the OEA's web site [www.moea.state.mn.us](http://www.moea.state.mn.us). The OEA does not contemplate appointing an advisory committee to comment on the planned rule amendments.

**Rules Drafts.** The OEA has prepared a draft of the planned rule amendments for review and comment.

**Agency Contact Person.** Written or oral comments, questions, requests to receive a draft of the rules and requests for more information on these planned rule amendments should be directed to: Hank Fisher, Minnesota Office of Environmental Assistance, 525 Lake Avenue South, Suite 400, Duluth, Minnesota, 55804. **Telephone:** (218) 529-6265 or (800) 657-3843, **FAX:** (218) 723-4727, **Email:** [henry.fisher@moea.state.mn.us](mailto:henry.fisher@moea.state.mn.us).

**Alternative Format.** Upon request, this Request for Comments can be made available in an alternative format, such as large print, Braille, or cassette tape. To make such a request, please contact the office contact person at the address or telephone number listed above.

**NOTE:** Comments received in response to this notice will not necessarily be included in the formal rulemaking record when a proceeding to adopt rules is started. The OEA is required to submit to the judge reviewing the rules only those written comments received in response to the rules after they are formally proposed.

Art Dunn, Director  
Minnesota Office of Environmental Assistance

## Minnesota Department of Health Division of Environmental Health REQUEST FOR COMMENTS on Possible Amendment of Rules Governing Health Risk Limits for Groundwater, *Minnesota Rules*, Parts 4717.7100 to 4717.7800 to be renumbered as Parts 4717.7810 to 4747.7890

**Subject of Rules.** The Minnesota Department of Health requests comments on its possible amendment to rules governing Health Risk Limits (HRLs) for groundwater. These rules are found at *Minnesota Rules*, parts 4717.7100 to 4717.7800. The Department is considering rule amendments that replace parts 4717.7100 to 4717.7800 with parts 4717.7810 to 4717.7890 and:

- Update the scientific data and risk assessment methods that underlie the HRLs;
- Incorporate the most recent research available;
- Align policy choices with the concerns and priorities of Minnesotans; and
- Comply with statutory requirements for review and 2001 statutory requirements for health standards.

**Persons Affected.** The amendments have the potential to benefit Minnesotans who use groundwater as their source of drinking water, especially those who live in areas affected by chemical leaks or spills. The amendments to the rules will likely affect state environmental and agricultural programs that use the HRLs to evaluate the need for regulations and to set clean-up goals. The amendments may indirectly affect other businesses and industries regulated by state and federal environmental programs.

**Statutory Authority.** *Minnesota Statutes*, section 103H.201, subdivision 1 authorizes the Department to promulgate health risk limits for substances degrading groundwater. Subdivision 2 states that the health risk limits shall be adopted by rule. Subdivision 3 requires the Commissioner to revise the HRLs.

**Public Comments.** Interested persons or groups may submit comments or information on these possible rules in writing until further notice is published in the *State Register* that the Department intends to adopt or to withdraw the rule. Beginning in October of 2001, the Minnesota Department of Health hosted four public meetings for HRL revision stakeholders to learn about the issues, hear MDH's recommendations, and provide comments. The Department has also met separately, on request, with groups of stakeholders. Details about the public meetings and requested meetings can be accessed at

<http://www.health.state.mn.us/divs/eh/groundwater/hrlgw/meetings.htm>.

The Minnesota Department of Health anticipates hosting a public question and answer session prior to proposing the revised HRL rules. More details about this session will be posted when they are available.

**Rules Drafts.** A draft of the possible rules is available at <http://www.health.state.mn.us/divs/eh/groundwater/hrlgw/revrule.html>. Written copies of the draft possible rules can be obtained from the agency contact person at the address or telephone number listed below.

**Agency Contact Person.** Written or oral comments; questions; and requests to receive a draft of the rules or a draft of the Statement of Need and Reasonableness should be directed to: Anne Kukowski ([anne.kukowski@health.state.mn.us](mailto:anne.kukowski@health.state.mn.us)) at the Minnesota Department of Health, 121 East 7<sup>th</sup> Place, Suite 220, P.O. Box 64975, St. Paul, Minnesota 44164-0975; phone (651) 215-0854, or FAX (651) 215-0975. TTY users may call the Department at (651) 215-0707.

**Alternative Format.** Upon request, this Request for Comments can be made available in an alternative format, such as large print, Braille, or cassette tape. To make such a request, please contact the agency contact person at the address or telephone number listed above.

**NOTE:** Comments received in response to this notice will not necessarily be included in the formal rulemaking record submitted to the administrative law judge when a proceeding to adopt rules is started. The agency is required to submit to the judge only those written

# Official Notices

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comments received in response to the rules after they are proposed.

Dated: 20 December 2004

Patricia A. Bloomgren, Director  
Division of Environmental Health

## Department of Labor and Industry Labor Standards Unit

### Notice of Prevailing Wage Determinations for Commercial Projects

On December 27, 2004, the commissioner determined and certified prevailing wage rates for Commercial construction projects in each of 87 counties statewide.

Copies may be obtained by writing the Minnesota Department of Labor and Industry, Prevailing Wage Section, 443 Lafayette Road North, St. Paul, Minnesota 55155-4306 or by calling (651) 284-5091, or by accessing our web site at [www.doli.state.mn.us](http://www.doli.state.mn.us). The charges for the cost of copying and mailing are \$.65 per page. Make check or money order payable to the State of Minnesota.

M. Scott Brener  
Commissioner

## Metropolitan Airports Commission Notice of Adoption of Ordinance No. 101

Please take notice that on the 20<sup>th</sup> day of December, 2004, at a special meeting of the Metropolitan Airports Commission (“Commission”), the Commission adopted Ordinance No. 101.

Ordinance No. 101:

An ordinance to promote and conserve the public safety, health, peace, convenience, and welfare; to amend the ground and percentage rental rates, fuel flowage fees and other charges for property at the Commission’s minor and intermediate use airports as provided by *Minnesota Statute* § 473.651; by amending and restating Ordinance No. 87 to revise the reverse sliding scale for percentage rent in Section 2.2, to add a landing fee at St. Paul Downtown Airport, to replace the Rent and Fee Schedule with a new Rent and Fee Schedule, to amend various other provisions and prescribing the penalty for violation thereof.

Copies of Ordinance No. 101 as adopted will be on file with the Secretary of State and may be obtained from the Metropolitan Airports Commission offices.

Jeffrey W. Hamiel  
Executive Director  
Metropolitan Airports Commission  
6040 - 28th Avenue South  
Minneapolis, MN 55450

## Metropolitan Council Public Hearing on Water Resources Management Policy Plan Update

Mears Park Centre  
Metropolitan Council Chambers  
230 East Fifth Street, St. Paul, Minnesota  
Tuesday, February 8, 2005  
2:00 – 4:00 p.m.

The Metropolitan Council will hold a public hearing on February 8, 2005 to receive comments on the Council’s updated Policy Plan/Development Guide Chapter – the *Water Resources Management Policy Plan*.

The Council adopted the *2030 Regional Development Framework* in January, 2004. The updated *Water Resources Management Policy Plan* takes its land-use direction from the *2030 Regional Development Framework*. The updated *Water Resources Management Policy Plan* lays out when and how regional sewer service will be provided to the planning areas identified in the *2030 Regional*

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## Official Notices

*Development Framework.* In addition, the new policy plan contains policies and implementation strategies pertinent to water supply, surface water management, and other wastewater issues. The main changes from the previous policy plan include:

- An approach to water supply planning in the metropolitan area that calls for a coordinated approach to water supply issues with the end goal in mind of providing for a sustainable, reliable, and secure supply of high quality water in support of orderly economic growth and high quality of life for the region.
- An approach to surface water management that ties the control of pollution from point and nonpoint sources together. Comprehensive plans, local water supply plans, and local surface water management plans will be reviewed for impacts on the regional wastewater system.
- The Council will consider acquiring and operating local wastewater treatment plants in rural growth centers upon request where enough growth is projected to make it economically feasible for the Council to become involved.
- Excessive inflow and infiltration (I/I) burdens the metropolitan sewer system. The revised plan provides for individual goals for reducing I/I for cities with excessive inflow/infiltration. A financial assistance program is included which will provide a funding mechanism to help solve the I/I problem.

The proposed *Water Resources Management Policy Plan* is available on the Metropolitan Council's web site at:

<http://www.metrocouncil.org/planning/environment/wrtoc.htm>

Printed copies are available at no charge by calling the Council's Data Center at (651) 602-1140 or (651) 291-0904 (TTY). Copies are also available for review at the main St. Paul, Minneapolis and county libraries:

Prior to the public hearing, there will be four informational meetings on the policy plan. These meetings are intended to provide an overview of the plan and to answer any questions about the plan. The meeting dates are as follows:

- Wednesday, January 12  
8:30 - 10:00 a.m.  
White Bear Lake City Hall – Chambers  
4701 Highway 61 N., White Bear Lake
- Wednesday, January 19  
1:00 - 2:30 p.m.  
Association of Metropolitan Municipalities  
145 University Ave., St. Paul
- Thursday, January 20  
8:30 - 10:00 a.m.  
Brookview Community Center  
200 Brookview Parkway, Golden Valley
- Monday, January 24  
7:00 - 8:30 p.m.  
Eagan City Hall – Eagan Room  
3830 Pilot Knob Road, Eagan

All interested persons are encouraged to attend the hearing on February 8, 2005, and provide comments. People may register in advance to speak by calling (651) 602-1140 or (651) 291-0904 (TTY).

The procedure for the hearing will be as follows: 1) Persons will be called to speak in the order in which they have signed in. Those preregistered by phone will be called on first. 2) Individuals will be asked to limit their remarks to 5 minutes. 3) Designated representatives of groups or organizations will be asked to limit their comments to 10 minutes. 4) The chair of the hearing may limit the testimony by any person.

You also may submit comments, which must be received by the Metropolitan Council no later than 5:00 p.m., February 18, 2005:

- Send written comments to: Metropolitan Council Data Center, Mears Park Center Bldg., 230 E. 5<sup>th</sup> St., St. Paul, MN 55101
- Fax comments to: (651) 602-1464, Attn: Data Center
- Record comments on Metropolitan Council Public Comment Line at (651) 602-1500
- E-mail comments to: [data.center@metc.state.mn.us](mailto:data.center@metc.state.mn.us)
- Send TTY comments to (651) 291-0904

Upon request the Council will provide reasonable accommodations to persons with disabilities. Please submit such request to via mail or fax (see above) or by phone at (651) 602-1140 before February 1, 2005.

# Official Notices

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## Minnesota Pollution Control Agency

### Public Notice of Rescission of State Manufacturing General Air Emission Permit

**NOTICE IS HEREBY GIVEN**, that the Commissioner of the Minnesota Pollution Control Agency (MPCA) proposes to rescind the state general permit governing stationary general manufacturing sources that do not require a Part 70 permit. The rescission of this general permit is authorized by Minn. R. 7007.1050, subp. 7, which allows the MPCA to void an existing permit because it is no longer necessary under existing law.

The stationary sources eligible for the state manufacturing general permit are sources that are required to obtain permits by Minnesota Rule 7007.0250, and include the operations described by the state manufacturing general permit. Because the state manufacturing general permit has become outdated due to changes in state and federal rules, and because there are other permitting options available to the sources eligible for the state manufacturing general permit, the MPCA has chosen to rescind or void the state manufacturing general permit at this time. No sources in Minnesota currently hold a state manufacturing general permit.

The public comment period terminates January 26, 2005. Comments must be received in writing at the MPCA by 4:30 p.m. on January 26, 2005. Evidence of timely receipt includes a date/time stamp imprinted on the first page of the written comments by the first floor information and reception area of the MPCA or by the Majors and Remediation Division support staff, or receipt by fax or email.

Comments, requests and petitions should be sent to:

Toni Volkmeier  
Major Air and Construction Section/Majors and Remediation Division  
Minnesota Pollution Control Agency  
520 Lafayette Road North  
St. Paul, MN 55155  
**Fax:** (651) 296-8717  
**E-mail:** [toni.volkmeier@pca.state.mn.us](mailto:toni.volkmeier@pca.state.mn.us)

Dated: December 17, 2004

Sheryl A. Corrigan, Commissioner  
Minnesota Pollution Control Agency

## State Rehabilitation Council Meeting Dates 2005

The State Rehabilitation Council will meet on the following dates at the designated location. For more information please contact the Department of Employment and Economic Development at: phone: (800) 328-9095; (651) 296-5629. TTY: (800) 657-3973; (651) 296-3900. If accommodations are required, please request them no later than one week in advance.

January 26, 2005  
Radisson Hotel Roseville  
2540 North Cleveland Avenue  
Roseville, MN 55113  
9:00 a.m - 2:00 p.m.

February 23, 2005  
Radisson Hotel Roseville  
2540 North Cleveland Avenue  
Roseville, MN 55113  
9:00 a.m. - 2:00 p.m.

March 23, 2005  
Minnesota Center for Independent Living  
1600 University Avenue West  
Suite 16  
Saint Paul, MN 55104-3825  
9:00 a.m. - 2:00 p.m.

# State Grants & Loans

In addition to requests by state agencies for technical/professional services (published in the State Contracts Section), the *State Register* also publishes notices about grants and loans available through any agency or branch of state government. Although some grant and loan programs specifically require printing in a statewide publication such as the *State Register*, there is no requirement for publication in the *State Register* itself. Agencies are encouraged to publish grant and loan notices, and to provide financial estimates as well as sufficient time for interested parties to respond.

## Department of Human Services

### Health Care Purchasing and Delivery Systems Division

#### Notice of Request for Proposals from Managed Care Organizations (MCOs) for the Expansion of Minnesota Disability Health Options

The Department of Human Services (DHS) is seeking two proposals for the Minnesota Disability Health Options (MnDHO) Integrated Medicare and Medicaid Demonstration from a qualified MCO with the mission, capacity and expertise to provide Medicare/Medicaid funded primary, acute, home and community-based, and long-term care services, to adults with disabilities. Enrollment in the MnDHO Program is on a voluntary basis.

The Department is seeking two separate proposals from qualified MCOs to expand MnDHO. The first proposal will expand MnDHO to adults with developmental disabilities ("DD Pilot"). The DD Pilot will operate for two years, starting from the effective date of the contract. The contract will provide coverage for up to 120 adult enrollees with developmental disabilities who live in Carver, Hennepin and Scott Counties.

The second proposal will expand MnDHO to adults with a physical disability residing in Carver, Scott and Washington Counties. MnDHO currently serves adults with physical disabilities living in Anoka, Dakota, Hennepin and Ramsey Counties.

Proposals and network capacity will be reviewed and must be approved by both the Centers for Medicare and Medicaid Services (CMS) and the State, and will be subject to the terms and conditions of the demonstration. Proposal requirements for prospective respondents must include network information, assurances and exhibits addressing the following: service area, care coordination, service delivery, network capabilities, administrative and reporting requirements, and enrollment and marketing. Contracts will be awarded based on: (1) capacity and geographic accessibility of service delivery sites; (2) ability to comply with service delivery standards appropriate to the demographic characteristics of the population to be enrolled; (3) financial and risk capability; and (4) ability to meet quality assurance, grievances and appeals and other reporting requirements. The Commissioner of DHS reserves the right to reject any proposal.

Requests for proposals will be available after 12:00 noon on December 27, 2004. Interested parties may access the RFP from the Department of Human Services **website:** [http://www.dhs.state.mn.us/RFP\\_Grants/default.htm](http://www.dhs.state.mn.us/RFP_Grants/default.htm) or receive a paper copy of the request by contacting:

Deborah Maruska  
Minnesota Disability Health Options  
Minnesota Department of Human Services  
444 Lafayette Road  
St Paul, Minnesota 55155-3854  
**Telephone:** (651) 296-0825  
**Fax:** (651) 297-3230  
**Email:** [deb.maruska@state.mn.us](mailto:deb.maruska@state.mn.us)

Prospective respondents with questions regarding this RFP may call, write or email: Deborah Maruska at the above address at 651-296-0825, [deb.maruska@state.mn.us](mailto:deb.maruska@state.mn.us). Ms. Maruska is the only person at the Department of Human Services authorized to answer questions regarding this document.

Interested MCOs, who are not current MnDHO contractors, must submit a written letter of intent to DHS at the above address by 4:00 p.m. on January 10, 2005. No electronic transmissions, including faxes, will be accepted. DHS would need to seek an amendment to the MnDHO Medicare Payment Demonstration waivers from CMS however there is no guarantee such an amendment will be considered at this time. DHS does not currently have the authority to expand MCO participation in MnDHO without this amendment.

Interested MCO's, who are current MnDHO contractors, must submit their written proposal(s) to DHS at the above address by 4:00 p.m. February 18, 2005. No electronic transmissions, including faxes, will be accepted.

# State Grants & Loans

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## Department of Human Services

### Request for Proposals for Projects of Regional Significance under the Children and Community Services Act

The Minnesota Department of Human Services (DHS) is requesting proposals (RFP) for the purpose of testing regional models that support children, families and individuals who experience dependency, abuse, neglect, poverty, disability, chronic health conditions, or other factors that may result in poor outcomes or disparities.

Eligible entities for the projects must be two or more Minnesota counties working at a regional level. Higher scores will be given to projects that partner with other entities, such as tribes, community action programs, family service collaboratives, children's mental health collaboratives, and/or voluntary support agencies in their region.

Responders should self-identify the regions to be served, including the counties and other partners participating in the regional project, in the response to the RFP.

Eligible proposals must respond to the specific needs of individuals and families requiring one or more of the following:

- Supportive housing services
- Children's mental health services
- Services to reduce chronic serious and violent offending
- Substance abuse services related to methamphetamine use
- Concurrent permanency planning services
- Services that address the over-representation of African American or American Indian children in out-of-home care.

All projects must:

- Coordinate services within a region and have effective working relationships with all stakeholders
- Include staff knowledgeable about community resources and supports in the region to be covered, the availability of those services, and any other information necessary for consumers to access timely and appropriate services
- Promote effective and efficient community services through systematic data collection and analysis that can be shared, as appropriate, to minimize the burden of duplicative data gathering and to facilitate service provision
- Effectively serve participants of diverse cultural and ethnic backgrounds with responsive services
- Be user friendly for consumers and their informal supports in terms of access and timeliness of service
- Be flexible, recognizing that counties are different in size, available services, local supports and individual needs
- Support partnerships with other entities, such as tribes, community action groups and voluntary support agencies.

Total funding for regional projects is estimated at \$25 million annually for each year of a two-year demonstration period (July 1, 2005 – June 30, 2007), with extensions for two more years possible, pending available funding and project evaluation. No more than fifteen regional projects will be funded. Funding may be requested for implementation and operation of a new regional project, or to expand an existing regional project. The nature of this project will require strong partnerships among counties to integrate services. A county human service agency must be the primary contractor for the partnership.

A complete Request for Proposals for Projects of Regional Significance will be available by electronic mail at the e-mail address below beginning January 7, 2005.

Responders must use the Request for Proposal template. Proposals must be received no later than 4:30 p.m. Central Standard Time on Monday, May 31, 2005.

Respondents are responsible for all costs associated with the preparation and submission of responses to this RFP. All responses to this Request for Proposal are public, according to Minnesota Statutes section 13.03, unless the data provided qualifies for a specific classification under chapter 13.

All submissions, questions, concerns or communications regarding this RFP should be addressed to:

Ralph McQuarter  
Minnesota Department of Human Services  
Children and Family Services Administration  
444 Lafayette Road N.  
St. Paul, MN 55155-3839  
**Phone:** (651) 296-0942  
**Fax:** (651) 297-1949  
**Email:** [ralph.mcquarter@state.mn.us](mailto:ralph.mcquarter@state.mn.us)

# State Contracts

**Informal Solicitations:** Informal solicitations for professional/technical (consultant) contracts valued at over \$5,000 through \$50,000, may either be published in the *State Register* or posted on the Department of Administration, Materials Management Division's (MMD) Web site. Interested vendors are encouraged to monitor the P/T Contract Section of the MMD Web site at [www.mmd.admin.state.mn.us](http://www.mmd.admin.state.mn.us) for informal solicitation announcements.

**Formal Solicitations:** Department of Administration procedures require that formal solicitations (announcements for contracts with an estimated value over \$50,000) for professional/technical contracts must be published in the *State Register*. Certain quasi-state agency and Minnesota State College and University institutions are exempt from these requirements.

## Minnesota Department of Corrections Notice of Request for Proposals (RFP) for Juvenile Female State Commit Residential Program

The Minnesota Department of Corrections (DOC) is requesting proposals for the provision of establishing and operating a residential treatment program for adolescent females committed to the Minnesota Commissioner of Corrections and adolescent girls who are awaiting a revocation of parole hearing and/or have had their parole revoked for a period of time, per *Minnesota Laws 1999*, Chapter 216, Article 4, Section 15.

It is anticipated that the contract resulting from this RFP will be for a period of 24 months effective July 1, 2005, with three one-year extensions possible at the discretion of the DOC and with the concurrence of the potential contractor. Dollar amount for the 24-month contract must not exceed \$600,000.

Potential responders interested in submitting a proposal should call, write, fax, or email for the full RFP which will be sent free-of-charge to interested vendors. Proposals must be submitted to the department contact person listed below. Other state personnel are **NOT** allowed to discuss the RFP with anyone, including responders, before the proposal submission deadline. Proposals must be received by the contact person listed below no later than 3:00 p.m. CDT, **February 11, 2005**. A Pre-Submission Response Workshop will be held on January 25, 2005, at the ETC Building (DOC), 1450 Energy Park Drive, Suite 200, St. Paul, Minnesota, from 10:00 a.m. to 12:00 noon.

David Johnson  
Community Juvenile Services  
Minnesota Department of Corrections  
1450 Energy Park Drive, Suite 200  
St. Paul, MN 55108-52190  
**Phone:** (651) 642-0334  
**Fax:** (651) 642-0314  
**Email:** [djohnson@co.doc.state.mn.us](mailto:djohnson@co.doc.state.mn.us)

## Department of Health Notice of Availability of Contract for Hospital HVAC for the Minnesota Bioterrorism Hospital Preparedness Program (BHPP)

The Minnesota Department of Health (MDH) is requesting proposals for the purpose of assisting in the development of infectious disease ventilation strategies for selected Minnesota hospitals in eight regions to meet the National Bioterrorism Hospital Preparedness Program (BHPP) guidelines related to improving and enhancing airborne infectious isolation (AII) ventilation in Minnesota hospitals. The minimum standard for the BHPP is to assure that all participating hospitals in Minnesota will have the capacity to maintain in negative pressure isolation at least one suspected case of a highly infectious disease or any patient who might possibly be developing a potentially highly communicable disease. In addition, at least one healthcare facility in each of eight Minnesota regions must be able to support the initial evaluation and treatment of at least 10 adult and pediatric patients at a time in negative pressure isolation. The goal of this particular contract is to assure adequate AII ventilation according to the stated standard.

Work is proposed to start after March 1, 2005.

A Request for Proposals will be available by mail from this office through January 14. **A written request (by direct mail or fax) is required to receive the Request for Proposal.** After January 14, 2005, the Request for Proposal must be picked up in person.

The Request for Proposal can be obtained from:

Lenette Bauer  
Acute Disease Investigation and Control  
Minnesota Department of Health  
717 Delaware St. SE

# State Contracts

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Minneapolis, MN 55414

**Fax:** (612) 676-5743

Proposals submitted in response to the Request for Proposals in this advertisement must be received at the address above no later than January 24, 2005, at 2:30 PM CST. **Late proposals will not be considered.** Fax or e-mailed proposals will **NOT** be considered.

This request does not obligate the State to complete the work contemplated in this notice. The State reserves the right to cancel this solicitation. All expenses incurred in responding to this notice are solely the responsibility of the responder.

## Department of Transportation

### Engineering Services Division

#### Notice of Potential Availability of Contracting Opportunities for a Variety of Highway Related Technical Activities (the "Consultant Pre-Qualification Program")

This document is available in alternative formats for persons with disabilities by calling Robin Valento at (651) 284-3622 for persons who are hearing or speech impaired by calling the Minnesota Relay Service at (800) 627-3529.

Mn/DOT, working in conjunction with the Consultant Reform Committee, the Minnesota Consulting Engineers Council, and the Department of Administration, has developed the Consultant Pre-qualification Program as a new method of consultant selection. The ultimate goal of the Pre-Qualification Program is to streamline the process of contracting for highway related professional/technical services. Mn/DOT anticipates that most consultant contracts for highway-related technical activities will be awarded using this method, however, Mn/DOT also reserves the right to use RFP or other selection processes for particular projects. Nothing in this solicitation requires Mn/DOT to complete or use the Consultant Pre-qualification Program.

Mn/DOT is currently requesting applications from consultants. Refer to Mn/DOT's Consultant Services web site, indicated below, to see which highway related professional/technical services are available at this time. Following the advertisement of particular category of services, applications will be accepted on a continual basis.

All expenses incurred in responding to this notice will be borne by the responder. Response to this notice becomes public information under the Minnesota Government Data Practices.

Consultant Pre-Qualification Program information, application requirements and application forms are available on Mn/DOT's **web site** at: <http://www.dot.state.mn.us/consult>

Send completed application material to:

Robin Valento  
Pre-Qualification Administrator  
Minnesota Department of Transportation  
Consultant Services  
395 John Ireland Boulevard, Seventh Floor North, Mail Stop 680  
St. Paul, MN 55155

**Note: DUE DATE: APPLICATION MATERIAL WILL BE ACCEPTED ON A CONTINUAL BASIS.**

## Department of Transportation

### Engineering Services Division

#### Notice Concerning Professional/Technical Contract Opportunities

**NOTICE TO ALL:** The Minnesota Department of Transportation (Mn/DOT) is now placing additional public notices for professional/technical contract opportunities on Mn/DOT's Consultant Services **website** at: [www.dot.state.mn.us/consult](http://www.dot.state.mn.us/consult).

New public notices may be added to the website on a daily basis and be available for the time period as indicated within the public notice.

## Non-State Contracts & Grants

The *State Register* also serves as a central marketplace for contracts let out on bid by the public sector. The *State Register* meets state and federal guidelines for statewide circulation of public notices. Any tax-supported institution or government jurisdiction may advertise contracts and requests for proposals from the private sector. It is recommended that contracts and RFPs include the following: 1) name of contact person; 2) institution name, address, and telephone number; 3) brief description of commodity, project or tasks; 4) cost estimate; and 5) final submission date of completed contract proposal. Allow at least three weeks from publication date (four weeks from the date article is submitted for publication). Surveys show that subscribers are interested in hearing about contracts for estimates as low as \$1,000. Contact editor for further details.

### Minnesota State Court, 4<sup>th</sup> Judicial District (Hennepin County) Request for Proposal for a Digital Audio Recording System

The 4th Judicial District Court is seeking proposals from qualified vendors to be responsible for planning, installation, and training on the use of digital audio recording equipment. The project includes installation of sound systems, wiring for audio and video transmission, and installation of computer hardware and software.

The Request for Proposals can be requested from James Anderson, 4<sup>th</sup> Judicial District, C-1719 Government Center, 300 So 6<sup>th</sup> St, Minneapolis, MN 55487. **Telephone:** (612) 348-8660.

All vendor questions and responses thereto will be posted on:

<http://www.courts.state.mn.us/districts/fourth/Administration/DCRQuestions.htm>

**Proposals must be received no later than 4:00 p.m. local (i.e., Minneapolis) time on January 18, 2005. Late proposals will not be accepted.**

## University of Minnesota

### Notice of Bid Information Services (BIS) Available for All Potential Vendors

The University of Minnesota offers 24 hour/day, 7day/week access to all Request for Bids/Proposals through its web-based Bid Information Service (BIS). Subscriptions to BIS are \$75/year. Visit our website at [bidinfo.umn.edu](http://bidinfo.umn.edu) or call the BIS Coordinator at (612) 625-5534.

Request for Bids/Proposals are available to the public at no charge each business day from 8:00 a.m. to 4:30 p.m. in the Purchasing Services lobby, Suite 560, 1300 S. 2nd Street, Minneapolis, Minnesota 55454.

